APPENDIX 4

Middlesbrough Council.

www.middlesbrough.gov.uk

COMMUNITY PROTECTION SERVICES Licensing

PO Box 65, Vancouver House, Gurney Street, Middlesbrough TS1 1QP Tel: (01642) 245432



Representations On A Current Application For A Grant/Variation of a Premises Licence Or Club Premises Certificate Under The Licensing Act 2003

Before Completing This Form Please Read The Guidance Notes At The End Of The Form

If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

l (Inser	PC 1841 Fmma Price		
Wish to	to make representation about the application for variation cate (delete as applicable)	n/grant for a premises licence/club	premises
PART	1 - PREMISES OR CLUB PREMISES DETAILS		
Postal	Address of Premises or Club Premises, or if none, ord	nance survey map reference or des	scription
	House, Corporation Road.		
	Town - Post	Code	
Middle	esbrough TS1 1	LY	•
Name	of premises licence holder or club holding club premise	es certificate (if known)	
-			
		•	
Numb	er of premises licence or club premise certificate (if kno	wn)	
PART	2 – DETAILS OF PERSON MAKING REPRESENTAT	ION	
Iam			
I alli			Please Tick ✓
1)	an interested party (please complete (A) or (B) below)	
	a) a person living in the vicinity of the premises		
	b) a body representing persons living in the vicinity o	f the premises	
	c) a person involved in business in the vicinity of the	premises	
	d) a body representing persons involved in business	in the vicinity of the premises	
2)	a responsible authority (please complete (C) below)		□ x ·
3)	a member of the club to which this representation rela	ates (please complete (A) below)	

(A) DETAILS OF INDIVIDUAL M	AKING REPI	RESENTA	TION (fill i	n as applicable)	
Mr Mrs Mrs	/liss	Ms	o	ther Title (for exa	ample, Rev)	
Surname			First Name	es		
I am 18 years old or over				Yes	(Please Ticl	k)
Current Address						•
Post Town				Post Code		
Daytime contact telephone number	er			V 1000 0		·
E-mail address (optional)			-,-		- 30000	
(B) DETAILS OF OTHER PARTY	MAKING RI	EPRESEN	ITATIOŅ (e	e.g. Body or Busi	ness)	
Name and Address	***					
• •						•
	 .					
Telephone Number (If any)	-				···	
E-Mail address (optional)		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				
			····		<u> </u>	
·						
(C) DETAILS OF RESPONSIBLE	AUTHORIT	Y MAKINO	3 REPRES	ENTATION		
Name and Address				-	· ·	
CHIEF CONSTABLE OF CLEVEL		E			•	
C/O POLICE SERGEANT 944 HI						
MIDDLESBROUGH DISTRICT HA	/Q					
BRIDGE STREET WEST						
MIDDLESBROUGH			,			
TS2 1AB				_	<u> </u>	
Telephone Number (If any)	01642 30	2360		Wales.		
<u>`</u>	01042 00	2000				
E-Mail address (optional)		•			•	

This representation relates to the following licensing objective(s)

				•	Please Tick ✓
1.	The prevention of crime and disorder				□X
2.	Public safety		•		
3.	The prevention of public nuisance				□X
4.	The protection of children from harm				

Please state the ground(s) for representation. (please read guidance note 1)

An application has been received to grant a premises licence for Unit C, Rede House, 66-77 Corporation Road, Middlesbrough. The application has been made by Samy Limited and is for the off premises supply of alcohol Monday – Sunday between 06:00 – 00:00 hours.

The premises are located in close proximity to a busy town centre area close to local residents, with some residents living above the proposed store. The area is also deemed by Middlesbrough Council to be a cumulative impact zone to which a special policy is in place, the onus is therefore placed upon the applicant to demonstrate how they will not further impact upon this area.

The proposed store is within an area which already suffers depravation and issue's surrounding alcohol related crime and anti-social behaviour. Between the 1st September 2017 and 28th February 2018, in a 500 meter radius surrounding the proposed store, there have been approximately 210 alcohol related offences, with around 129 anti-social behaviour incidents also fuelled by alcohol.

On 17th January 2018 a meeting was held with the principle contractor for the Rede House site. During this meeting it was discussed that a convenience store would be proposed; for which the sale of alcohol would be applied for between 07:00-21:00 hours.

Responsible Authorities party to the meeting advised that the premises were located within the Cumulative Impact zone and that any subsequent applications would come under strict scrutiny to overcome any contribution to the impact on this area.

The application recognises that the location is within a cumulative impact zone, however it further states that the premises is not in a residential area when it is on the ground floor of Rede House which is a block of flats and close to Central Mews which are also dwellings.

The application claims there will be no negative impact on the licensing objectives by proposing a number of conditions. It is the view of the Police that those proposed are insufficient to make that claim and lacking in detail.

For example the application states there will be a local DPS when the proposed DPS is from an address in Cambridge. The application states there will be sufficient staff on duty with no detail

around numbers. The application has a condition that states "Business following the same procedure as Tesco Express if permitted" without an explanation as to what is meant by this. Contact has been made with the legal representative for the applicant, Samy Limited to arrange a meeting to discuss the application and the concerns of the Responsible Authorities; however to date no meeting has taken place. Please provide as much information as possible to support the representation. (Please read guidance note 2) Should the application not be withdrawn then Cleveland Police will provide further evidence. Please Tick Have you made any representation relating to these premises before? Day Month Year If Yes, please state the date of that representation If you have made representation before relating to these premises please state what they were and when you made them.		•				
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Have you made any representation relating to these premises before? Day Month Year				,		
If Yes, please state the date of that representation Day Month Year If you have made representation before relating to these premises please state what they were and when					11CK V	
If Yes, please state the date of that representation	Have you made any representation relating to these	premises b	efore?			
If Yes, please state the date of that representation			<u> </u>			
If you have made representation before relating to these premises please state what they were and when	·	Day	Month		Year	
If you have made representation before relating to these premises please state what they were and when you made them.	If Yes, please state the date of that representation	<u> </u>				
If you have made representation before relating to these premises please state what they were and when you made them.	•	<u> </u>		<u> </u>		
If you have made representation before relating to these premises please state what they were and when you made them.			•		- •	
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	you made alom.					
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How We Collect And Use Information

By completing this document you give Middlesbrough Council the authority to collect and retain information about you for the purpose of the application. In order to process the application we may need to check this information with other enforcement agencies, local authorities or government departments.

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information with other enforcement agencies including those organisations which handle public funds. Middlesbrough Council will not disclose information about you unless the law permits.

Middlesbrough Council is the Data Controller for the purposes of the Data Protection Act. If you want to know more about the information the Authority holds about you or the way the Authority uses that information please contact the Information Security Officer, PO Box 17, Melrose House, 1 Melrose Street, Middlesbrough, TS1 2YW.

Signature of representative or representative's solicitor or other duly authorised agent. (See guidance note 4) If signing on behalf of the representative please state in what capacity.

Signature		Date	
	PC 1841 Price		08/03/2018
Capacity		<u> </u>	
<u></u>	Cleveland Police Licensing	Support Office	сег

Contact name (where not previously given) and representation. (Please read guidance note 5)	address for correspondence associated with t	this
Middlesbrough Police HQ, Bridge Street West,		
Post Town	Post Code	
Middlesbrough	TS2 1AB	

Telephone Number (if any)	01642 302360
E-mail Address (optional)	emma.price@cleveland.pnn.police.uk

Notes for Guidance

- 1. The ground(s) for representation must be based on one of the licensing objectives.
- 2. Please list any additional information or details for example dates of problems, which are included in the grounds for representation, if applicable.
- 3. The representation form must be signed.
- 4. A representative's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 5. This is the address, which we shall use to correspond with you about this representation.
- 6. Information on the Licensing Act 2003 is available at www.middlesbrough.gov.uk and you are advised to read any relevant guidance leaflets before completing this form.

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