
Environment

Community Protection Service

PO Box 502, Vancouver House, Gurney Street, Middlesbrough, TS1 9FW **Tel: (01642) 245432**

**FOR THE CHAIR AND MEMBERS OF
THE LICENSING SUB-COMMITTEE
FOR 22 NOVEMBER 2012**

APPLICATION FOR PREMISES LICENCE

Applicant: Ajy Kurian

Ref.No. PR0004

Premises: Finlays Newsagents, 267 Acklam Road, Middlesbrough, TS5 7BP

Application received: 2 October 2012

Summary of proposed Licensable Activities:

Supply of Alcohol (Off Sales) – 6am to 11pm Monday to Sunday

Full details of the application and accompanying operating schedule have been reproduced at Appendix 1.

1. Notification to Responsible Authorities:

The following Responsible Authorities have all received notification of the application:

Chief Constable	Planning Manager
Chief Fire Officer	Trading Standards Manager
Area Child Protection Group	Director of Public Health
Environmental Health Manager (Public Safety and Public Nuisance)	

2. Application advertised by the applicant: Evening Gazette - 8 October 2012

3. Legislation

The Licensing Act 2003 requires the Licensing Authority to carry out its functions with a view to promoting the four licensing objectives:

- The Prevention of Crime and Disorder
- Public Safety

- The Prevention of Public Nuisance
- The Protection of Children from Harm

The Licensing Authority must also have regard to its Licensing Policy and any guidance issued by the Secretary of State.

4. Background

The premises consist of a shop located in a retail block on Acklam Road between the junctions of Church Lane and Coniston Grove. There are residential properties in close proximity to the premises. A location plan is attached at Appendix 2.

5. The Representations

On 15 October 2012 a representation was received from Councillor Hazel Pearson OBE, the local Councillor for the Kader Ward (the adjoining ward to the ward within which the premises are located) objecting to the application on the grounds of the prevention of public nuisance and the protection of children from harm. A copy of this representation is attached at Appendix 3.

On 24 October 2012 a representation was received from Lodore Residents Association objecting to the application on the grounds of the prevention of public nuisance. A copy of this representation is attached at Appendix 4.

On 30 October 2012 a representation was received from Cleveland Police objecting to the application on the grounds of the prevention of crime and disorder, public safety, the prevention of public nuisance and the protection of children from harm. A copy of this representation is attached at Appendix 5.

6. The Licensing Policy

Members are referred to the following relevant sections of the Council's Licensing Policy.

Prevention of Crime and Disorder	Pages 32 to 42
Public Safety	Pages 30 to 31
Prevention of Public Nuisance	Pages 23 to 29
Protection of Children from Harm	Pages 43 to 45

And any other sections of the Policy which Members consider to be relevant.

7. Guidance to the Licensing Act 2003

Members are referred to the following relevant sections of the Guidance.

Crime and Disorder	Starting at paragraph 2.1
Public Safety	Starting at paragraph 2.8
Public Nuisance	Starting at paragraph 2.18
Protection of Children from Harm	Starting at paragraph 2.25

And any other sections of the Guidance which Members consider to be relevant.

8. Members' Options

Members may consider the following options:

1. Grant the application subject to conditions consistent with the operating schedule and mandatory conditions if applicable.

2. Grant the application subject to the addition of new conditions.
3. Refuse to specify a person in the licence as the premises supervisor.
4. Reject the whole or part of the application.

Members are reminded that any aggrieved party (i.e. Applicant, Responsible Authority, Other Person) may appeal any decision of the Licensing Committee to the Magistrates' Court.

Contact Officer: John Hodgson
Senior Licensing Officer
Tel. 728719

Ed Chicken
Head of Community Protection
Date: 22 November 2012

For admin use only:

Decision:

Reasons:

Application for a premises licence to be granted under the Licensing Act 2003

2-001 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

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.

I/WE AJY KURIAN

(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 - Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
FINLAYS NEWSAGENTS			
267 ACKLAM ROAD			
Post town	MIDDLESBOROUGH	Post code	TS5 7BP

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as
Please tick yes

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)
- c) a recognised club please complete section (B)
- d) a charity please complete section (B)

- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
 - statutory function or
 - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname KURIAN			First names AJY		
I am 18 years old or over				<input checked="" type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post Town	MIDDLESBOROUGH		Postcode	S1 2JY	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	

Current postal address if different from premises address			
Post Town		Postcode	
Daytime contact telephone number			
E-mail address (optional)			

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

Day Month Year

2	9	1	0	2	0	1	2
---	---	---	---	---	---	---	---

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day Month Year

1	1	1	1	1	1	1	1
---	---	---	---	---	---	---	---

Please give a general description of the premises (please read guidance note 1)
BRICK BUILT LOCAL SHOP ON BUSY MAIN ROAD

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick yes

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of entertainment facilities:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

Supply of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
Wed			
Thur			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for the performance of live music (please read guidance note 4)		
Wed					
Thur			Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Fri					
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Wed					
Thur			<u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p><u>Please give a description of the type of entertainment you will be providing</u></p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 3)</p>		
Wed					
Thur			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)</p>		
Fri					
Sat			<p><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 5)</p>		
Sun					

Provision of facilities for making music Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u>	
			<u>Will the facilities for making music be indoors or outdoors or both – please tick</u> (please read guidance note 2)	
Day	Start	Finish		
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue				
Wed			<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)	
Thur				
Fri			<u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)	
Sat				
Sun				

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			<u>Will the facilities for dancing be indoors or outdoors or both – please tick</u> (see guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
			<u>Please give a description of the facilities for dancing you will be providing</u>		
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun			<u>State any seasonal variations for providing dancing facilities</u> (please read guidance note 4)		
			<u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		

K

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment facility you will be providing</u>		
Day	Start	Finish	<u>Will the entertainment facility be indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thur			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun					

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Wed					
Thur			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	06:00	23:00	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Tue	06:00	23:00			
Wed	06:00	23:00			
Thur	06:00	23:00			
Fri	06:00	23:00			
Sat	06:00	23:00			
Sun	06:00	23:00			
			Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5)		

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name AJY KURIAN	
Address 	
Postcode	51 2BY
Personal Licence number (if known) tba	
Issuing licensing authority (if known) MIDDLESBOROUGH CITY COUNCI	

N

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	06:00	23:00	Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)
Tue	06:00	23:00	
Wed	06:00	23:00	
Thur	06:00	23:00	
Fri	06:00	23:00	
Sat	06:00	23:00	
Sun	06:00	23:00	

P Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

ALL STAFF WILL BE TRAINED WITH REGARD TO THE LICENCING ACT 2003, THE SERVICE OF ALCOHOL AND TOBACCO. A RECORD WILL BE KEPT OF ALL ATENTIVE PURCHASES BY UNDER 18'S. WE WILL LIAISE WITH THE LOCAL POLICE LICENCING OFFICER ON A REGULAR BASIS.

b) The prevention of crime and disorder

PROMINENT SIGNS ARE DISPLAYED WITH REGARD TO ALCOHOL AND TOBBACO SALES
CCTV CAMERAS ARE INSTALLED AT THE PREMISES
A REFUSAL BOOK IS KEPT AT THE PREMISES

c) Public safety

ALL EMREGENCY LIGHTING WILL BE CHECKED WEEKLY
ENTRANCES , EXITS AND PASSEGEWAYS ARE KEPT CLEAR

d) The prevention of public nuisance

PROMINENT SIGNS WILL BE DISPLAYED REQUESTING CUSTOMERS TO HAVE REGARD FOR LOCAL RESIDENTS WHEN LEAVING THE PREMISES
ADEQUATE BINS ARE AVAILABLE FOR CUSTOMERS TO DISPOSE OF LITTER

e) The protection of children from harm

WE WILL OPERATE A CHALLENGE 21 POLICY

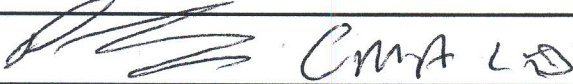
Please tick yes

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	1-10-12
Capacity	AUTHORISED AGENT

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

CAVAN MARTIN & ASSOCIATES LTD
THE DOG AND PARTRIDGE
136 HIGH STREET

Post town DUDLEY **Post code** DY5 3BP

Telephone number (if any) 0800 242 5011

If you would prefer us to correspond with you by e-mail your e-mail address (optional)
cavanmartinassociates@btinternet.com

Consent of individual to being specified as premises supervisor

AJY KURIAN

I

[full name of prospective premises supervisor]

of

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

NEW PREMISES LICENCE

[type of application]

by

AJY KURIAN

[name of applicant]

relating to a premises licence

TBA

[number of existing licence, if any]

for

FINLAYS NEWSAGENTS
267 ACKLAM ROAD
MIDDLESBOROUGH
TS5 7BP

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

AJY KURIAN

[name of applicant]

concerning the supply of alcohol at

FINLAYS NEWSAGENTS
267 ACKLAM ROAD
MIDDLESBOROUGH
TS5 7BP

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

TBA

[insert personal licence number, if any]

Personal licence issuing authority

MIDDLESBOROUGH CITY COUNCIL

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



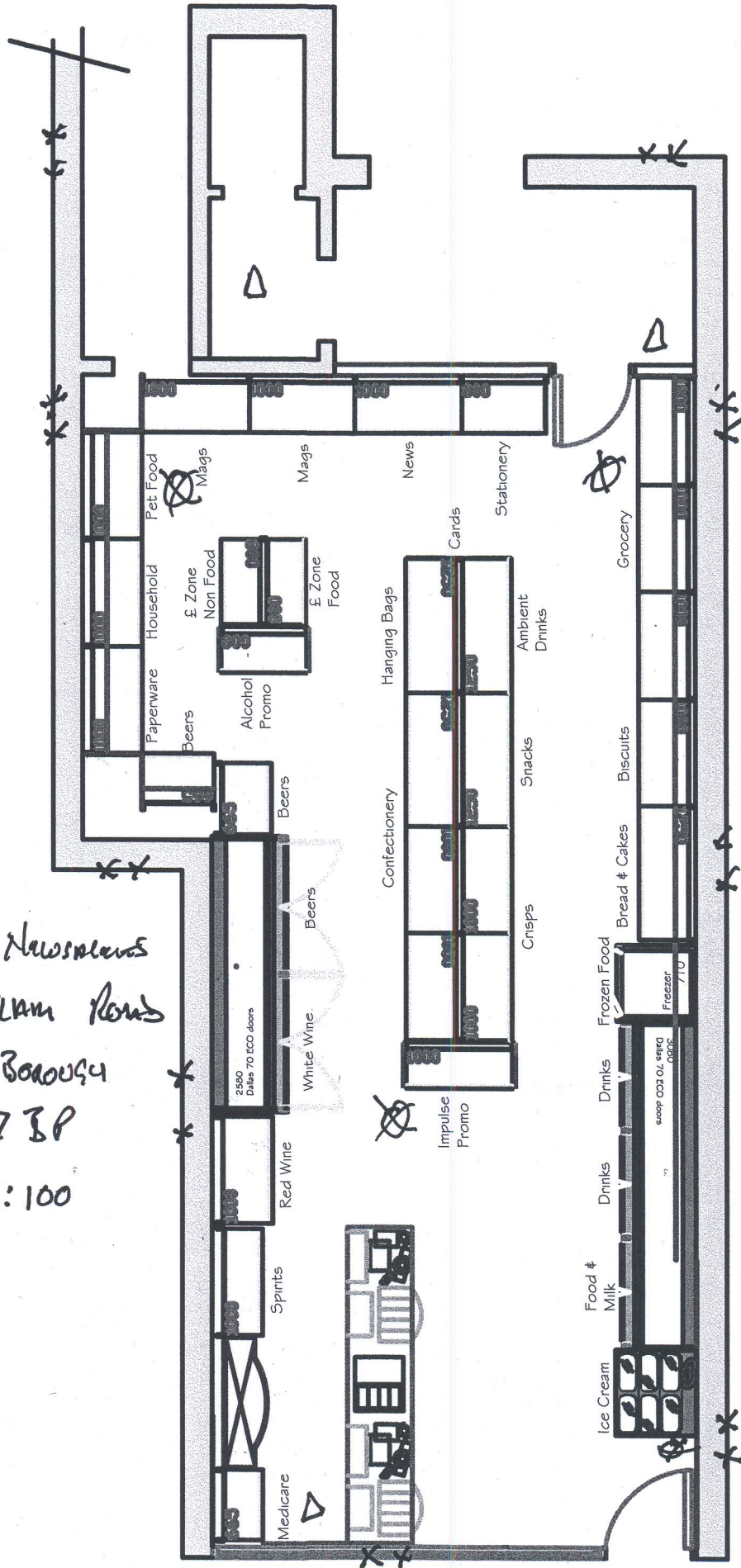
Name (please print)

AJY KURIAN

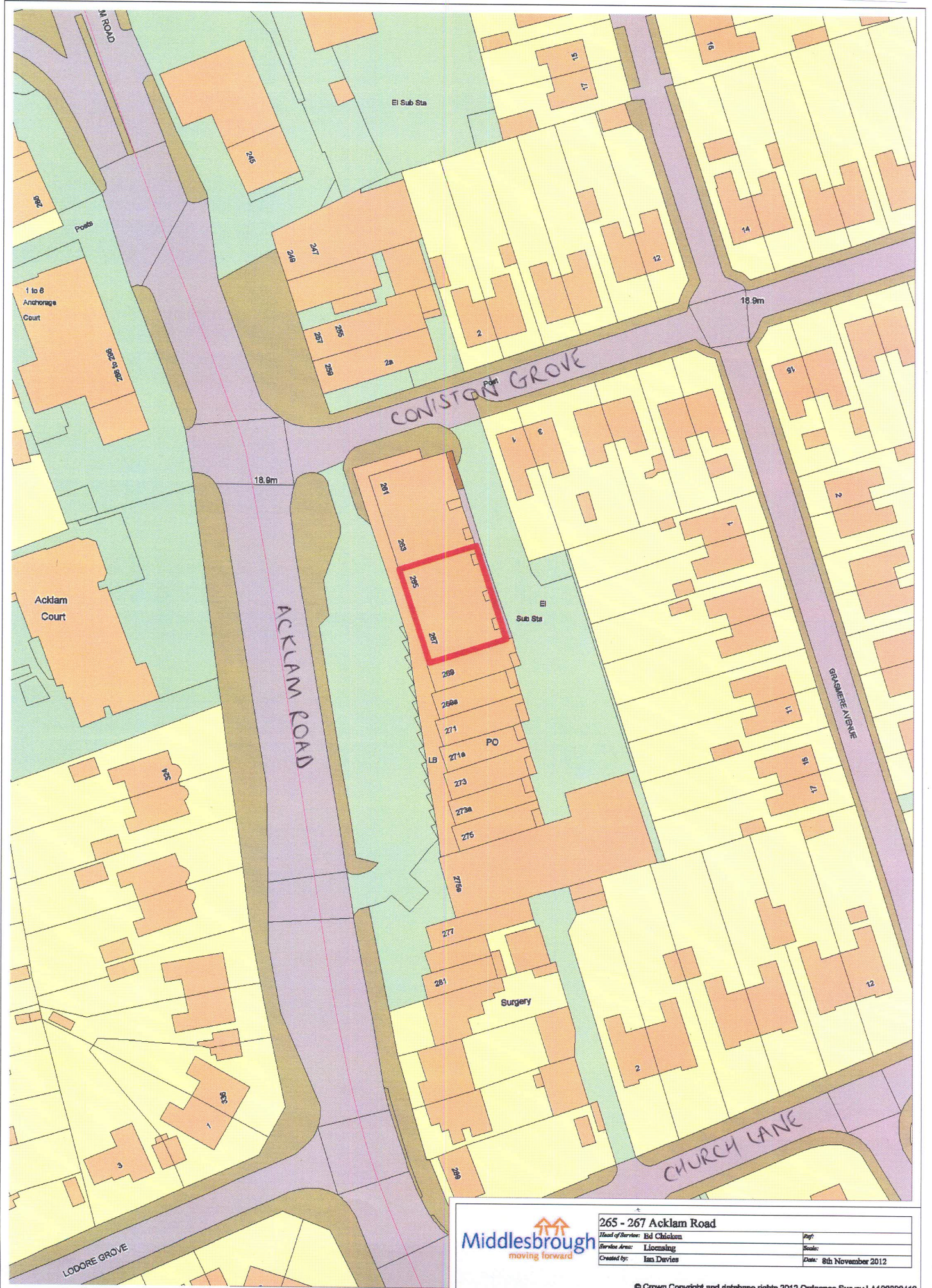
Date

1-10-12

FINLAYS NEWSSTANDS
 267 ACKLAM ROAD
 MIDLESBOROUGH
 TS5 7BP
 SCALE 1:100



Δ FIRE EXTINGUISHER
 ⊗ CCTV
 XX LICENCEABLE ACTIVITY.



265 - 267 Acklam Road	
Head of Service: Ed Chickens	Prof:
Service Area: Licensing	Scale:
Created by: Ian Davies	Date: 8th November 2012

Fw: Finlays - Acklam

Tim Hodgkinson to: Elita Croce, Scott Lawrence

15/10/2012 12:47

Tim Hodgkinson
Principal Licensing Officer
Middlesbrough Council
Tel 01642 728720

----- Forwarded by Tim Hodgkinson/COMPROT/Middlesbrough_Borough_Council/GB on
15/10/2012 12:47 -----

Hazel
Pearson/Councillors
/Middlesbrough_Bor
ough_Council/GB
Sent by: Julie Lewis

To Tim
Hodgkinson/COMPROT/Middlesbrough_Borough_Council/G
B@Middlesbrough_Borough_Council

cc

15/10/2012 12:29

Subject Finlays - Acklam

Tim, I wish to strongly object to the application re Finlays, Coniston Shops regarding a drinks licence. There are many instances of difficulties in the evenings concerning the behaviour of youths in the area. We already have 3 shops selling alcohol and feel that an extra one would increase the problems already there. There is also the problem of sales to schoolchildren. Please could you convey our opposition to this application to the relevant committee.

Hazel

LODORE RESIDENTS ASSOCIATION**CHAIRMAN**
Mr Keith Johnston**SECRETARY**
Mrs Joan Olley22nd October, 2012

The Licensing Officer, Licensing Section,
Middlesbrough Council, PO Box 502,
Vancouver House, Gurney Street,
Middlesbrough, TS1 9FW.



Dear Sir,

Licensing Act 2003 - Premises Licence Grant, Findlays Newsagents, 267 Acklam Road, Middlesbrough

Our Association represents residents living in the Lodore Grove area. We would like to comment on the application by Mr Kurian for a premises licence at the above address.

On Acklam Road immediately opposite our small estate, in the space of about 200 metres, there are presently five licensed outlets - the Coronation Hotel, the Master Cooper, Tesco Express, the Post Office and the Spar supermarket. This, in our opinion, is at least one too many already. Does this small part of Acklam Road need yet another outlet for alcohol? We think not! Is there a record to be broken that we don't know about?

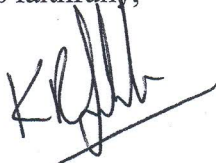
As in most areas, Acklam has its share of alcohol related anti social behaviour and underage drinking problems. Our estate is used as a short cut from Acklam Road to Trimdon Avenue and beyond, and certain parts of the estate have, at various times, been the subject of "priority" (for extra surveillance) by Neighbourhood police because of such behaviour. The nearby Bluebell Beck area is a popular teenage drinking venue, especially in the summer, but with some all-year round drinking "dens" too which necessitate police intervention from time to time.

In the same week that the local Post Office was granted a Premises Licence (20.03.12) the Mayor of Middlesbrough, Mr Ray Mallon, made comments in the "Evening Gazette" that alcohol abuse was worse than drug abuse.

This area is not unique. It mirrors accurately the well publicised health and social problems caused by excessive alcohol consumption countrywide, but especially in the North East. The cost to the NHS is also well documented.

We value our local Newsagent's which is run efficiently by Mr Kurian. It serves the community well, and has a useful delivery service. However, and it is a big however, this small part of Acklam does not need or want another off-licence.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Keith Johnstone', written over a horizontal line.

Chairman
Mr Keith Johnstone

cc: Councillors' Mrs H Pearson, OBE, and Mr Ron Arundale

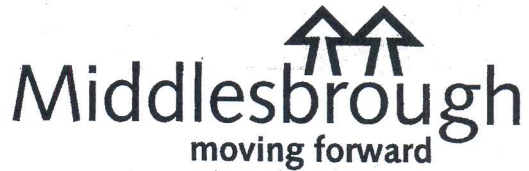
Middlesbrough Council

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.

I (insert name)

Marie Nevison

Wish to make representation about the application for variation/grant for a premises licence/club premises certificate (delete as applicable)

PART 1 – PREMISES OR CLUB PREMISES DETAILS

Postal Address of Premises or Club Premises, or if none, ordnance survey map reference or description

Finlays Newsagents
267 Acklam Road

Post Town
Middlesbrough

Post Code
TS5 7BP

Name of premises licence holder or club holding club premises certificate (if known)

N/A

Number of premises licence or club premise certificate (if known)

N/A

PART 2 – DETAILS OF PERSON MAKING REPRESENTATION

I am

- | | Please Tick ✓ |
|--|-------------------------------------|
| 1) an interested party (please complete (A) or (B) below) | <input type="checkbox"/> |
| a) a person living in the vicinity of the premises | <input type="checkbox"/> |
| b) a body representing persons living in the vicinity of the premises | <input type="checkbox"/> |
| c) a person involved in business in the vicinity of the premises | <input type="checkbox"/> |
| d) a body representing persons involved in business in the vicinity of the premises | <input type="checkbox"/> |
| 2) a responsible authority (please complete (C) below) | <input checked="" type="checkbox"/> |
| 3) a member of the club to which this representation relates (please complete (A) below) | <input type="checkbox"/> |

(A) DETAILS OF INDIVIDUAL MAKING REPRESENTATION (fill in as applicable)

Mr Mrs Miss Ms Other Title (for example, Rev)

Surname

First Names

I am 18 years old or over Yes (Please Tick)

Current Address	<input type="text"/>		
Post Town	<input type="text"/>	Post Code	<input type="text"/>

Daytime contact telephone number

E-mail address (optional)

(B) DETAILS OF OTHER PARTY MAKING REPRESENTATION (e.g. Body or Business)

Name and Address	<input type="text"/>
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Telephone Number (If any)	<input type="text"/>
E-Mail address (optional)	<input type="text"/>

(C) DETAILS OF RESPONSIBLE AUTHORITY MAKING REPRESENTATION

Name and Address	<input type="text"/>
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CHIEF CONSTABLE OF CLEVELAND POLICE
C/O POLICE SERGEANT 944 HIGGINS
MIDDLESBROUGH DISTRICT H/Q
BRIDGE STREET WEST
MIDDLESBROUGH
TS2 1AB

Telephone Number (If any)	01642 303176
E-Mail address (optional)	

This representation relates to the following licensing objective(s)

- | | Please
Tick ✓ |
|---|----------------------------|
| 1. The prevention of crime and disorder | <input type="checkbox"/> X |
| 2. Public safety | <input type="checkbox"/> X |
| 3. The prevention of public nuisance | <input type="checkbox"/> X |
| 4. The protection of children from harm | <input type="checkbox"/> X |

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

This is a new application for a premises licence for the sale of alcohol (for consumption off premises) 7 days a week, between the hours of 06:00 and 23:00 daily.

Cleveland Police wish to make representations against this application for the following reasons:

Cleveland Police receive numerous reports of anti social behaviour in and around the area of Acklam Road where this premises is situated.

In addition to this, it is of concern that the premises is situated in a residential area and residents are already subjected to alcohol related anti social behaviour caused by under aged persons and persons under the influence of alcohol causing nuisance/disorder.

It is strongly believed that should this licence be granted, this anti-social behaviour will become more prevalent and cause further detriment to the quality of life of the local residents.

Cleveland Police are firmly of the opinion that the granting of this application would directly undermine the above licensing objectives, and should therefore be refused.

Please provide as much information as possible to support the representation. (Please read guidance note 2)
In the event that this application is not withdrawn, further evidence can be supplied in the

near future.

Please
Tick ✓

Have you made any representation relating to these premises before?

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 you made them.

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.

Part 3 – Signatures (Please read guidance note 3)

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	Marie Nevison	Date	30 th October 2012
Capacity	Solicitor		

Contact name (where not previously given) and address for correspondence associated with this representation. (Please read guidance note 5)

Post Town	Post Code
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Telephone Number (if any)	
E-mail Address (optional)	marie.nevison@cleveland.pnn.police.uk