

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

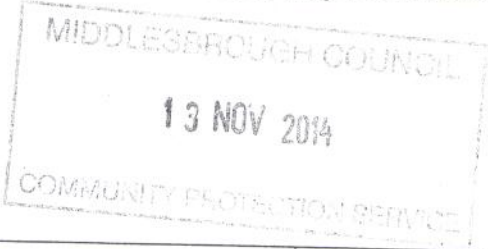
You may wish to keep a copy of the completed form for your records.

I/We Rontec Watford Limited

(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 Coronation Service Station 245 Acklam Road			
			
Post town	Middlesbrough	Post code	TS5 7BW
Telephone number at premises (if any)		01642 823862	
Non-domestic rateable value of premises		£21,750	

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick yes

- | | | |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i. as a limited company | <input checked="" type="checkbox"/> | please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> | please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | 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 in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England 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 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)					

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 Rontec Watford Limited	
Address	
Registered Office:	Preferred Address:
13-14 Esplanade St Helier Jersey JE1 1BD	3 rd Floor Meridien House 67-71 Clarendon Road Watford WD17 1DS
Registered number (where applicable) 108486	
Description of applicant (for example, partnership, company, unincorporated association etc.) Company	
Telephone number (if any) 01923 694038	
E-mail address (optional)	

Part 3 Operating Schedule

When do you want the premises licence to start?

Day		Month		Year			
1	2	1	2	2	0	1	4

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

Day		Month		Year			
±	±	±	±	±	±	±	±

Please give a general description of the premises (please read guidance note1)

A petrol forecourt store which is to sell a broad range of groceries, household products and alcohol.

Situated at Coronation Service Station, 245 Acklam Road, Middlesbrough, TS5 7BW.

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 late night refreshment (if ticking yes, fill in box I)

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

In all cases complete boxes K, L and M

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 checked="" 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	0000	0500						
	2300	2400						
Tue	0000	0500						
	2300	2400						
Wed	0000	0500				<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
	2300	2400						
Thur	0000	0500						
	2300	2400						
Fri	0000	0500						
	2300	2400						
Sat	0000	0500						
	2300	2400						
Sun	0000	0500						
	2300	2400						

J

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	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	0600	2300			
Tue	0600	2300			
Wed	0600	2300			
Thur	0600	2300			
Fri	0600	2300			
Sat	0600	2300	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)		
Sun	0600	2300			

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

Name Giles Nicholas Taylor	
Address 95 Laugherne Road St Johns Worcester	
Postcode	WR2 5LY
Personal Licence number (if known) WORC1417	
Issuing licensing authority (if known) Worcester City Council	

K

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)

The premises will sell other age restricted products.

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4) The opening hours of the store are not a licensable activity and the applicant asks that the hours not be restricted by the premises licence.
Day	Start	Finish	
Mon	0000	2400	<u>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</u> (please read guidance note 5)
Tue	0000	2400	
Wed	0000	2400	
Thur,	0000	2400	
Fri	0000	2400	
Sat	0000	2400	
Sun	0000	2400	

M 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)

b) The prevention of crime and disorder

1. A CCTV system will be installed, or the existing system maintained, such system to be fit for the purpose.
2. The CCTV system shall be capable of producing immediate copies of recordings on site. Copies of recordings will be capable of being recorded digitally on to CD/DVD or other equivalent medium.
3. Any recording shall be retained and stored in a suitable and secure manner for a minimum of 28 days and shall be made available, subject to compliance with Data Protection legislation, to the police for inspection on request.
4. The CCTV system will incorporate a camera covering the entrance door and the alcohol display areas and will be capable of providing an image which is regarded as identification standard. The precise positions of the cameras may be agreed, subject to compliance with Data Protection legislation, with the police from time to time.
5. The system will display, on any recording, the correct time and date of the recording.
6. A system will be in place to maintain the quality of the recorded image.
7. The CCTV system will be maintained so as to be fully operational throughout the hours that the premises are open for any licensable activity.

c) Public safety

The premises licence holder will at all times maintain adequate levels of staff. Such staff levels will be disclosed, on request, to the licensing authority and police.

d) The prevention of public nuisance

Adequate waste receptacles for use by customers shall be provided in and immediately outside the premises.

e) The protection of children from harm

The premises licence holder will ensure that an age verification policy will apply to the premises whereby all cashiers will be trained to ask any customer attempting to purchase alcohol, who appears to be under the age of 25 years (or older if the licence holder so elects) to produce, before being sold alcohol, identification being a passport or photocard driving licence bearing a holographic mark or other form of identification that complies with any mandatory condition that may apply to this licence.

- 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	Winchworth Sherwood LLP
Date	12 November 2014
Capacity	Solicitors duly authorised on behalf of the Applicant

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) Winckworth Sherwood LLP (Ref: CVE/32991/200/RPB) Minerva House 5 Montague Close			
Post town	London	Post code	SE1 9BB
Telephone number (if any)	020 7593 0277		
If you would prefer us to correspond with you by e-mail your e-mail address (optional) cedwards@wslaw.co.uk			

Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

LODORE RESIDENTS ASSOCIATION**CHAIRMAN**
Mr Keith Johnston**SECRETARY**
Mrs Joan Olley24th November, 2014

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



Dear Sir,

Licensing Act 2003. Application for a Premises Licence, Coronation Service Station,
245 Acklam Road, Middlesbrough

Our Association represents residents living in the Lodore Grove area. We would like to comment on the application by Rontec Watford Limited for a premises licence, and more, for the above address.

On Acklam Road, immediately opposite our small estate and in the space of about 200 metres, there are presently five licensed outlets with generous opening hours – the Coronation Hotel, the Master Cooper, Tesco Express, the Post Office/Bargain Booze and the Spar supermarket. This is, in our opinion, far too many already.

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, on occasions, been given “priority” by Neighbourhood police to deal with such behaviour. The nearby Blue Bell beck green wedge area is a popular teenage drinking venue, especially in the summer, and police intervention has been required from time to time in this area.

In the same week that the local Post Office was granted a premises licence and became a Bargain Booze outlet (20.03.12) the Mayor of Middlesbrough, Mr Ray Mallon, made comments in the local Evening Gazette that alcohol abuse was worse than drug abuse.

On the 22nd November 2012, the grant of a premises licence was refused by the Licensing Committee for Findlays Newsagents, 267 Acklam Road (very close to 245 and within the 200 metre stretch of Acklam Road mentioned previously). In this instance the Licensing Committee considered Home Office Guidance under Section 182 of the Licensing Act, and the Council's licensing policy, as well as various representations, but in particular representations made by the police. As far as we are aware, nothing has changed in the interim.

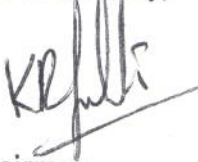
Our area is not unique. It mirrors accurately the well publicised health and social problems caused by excessive alcohol consumption countrywide, and especially in the North East. The cost to the NHS is also well publicised.

The application on behalf of the owners of the Coronation Service Station seems to us to be controversial – we feel going to a petrol station for alcohol is open to self-evident abuse. Also strange, is the divide line between 11pm to 5 am for “late night refreshment.” This would be extremely difficult, if not impossible, to enforce if a customer or even worse a group of customers wanted alcohol rather than coffee at one minute past 11 pm or in the middle of the night. The vulnerability of staff in such a situation is patently obvious no matter what security arrangements were in place. The situation would be very hard to police.

This small part of Acklam does not need another outlet for alcohol, nor is there a need for late night refreshment.

We strongly object to both applications.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'KE Johnston', with a horizontal line underneath.

Chairman
Mr Keith Johnston

cc: The Officer in Charge, District Licensing Unit, Cleveland Police.

Councillor

PO Box 503, Town Hall, Middlesbrough, TS1 9FX

COUNCILLORS RON ARUNDALE AND HAZEL PEARSON OBE, LLM

121 Ruskin Avenue
Acklam
Middlesbrough
TS5 7RU
Tel: 288504
E-Mail: ronald_arundale@middlesbrough.gov.uk

47 Ruskin Avenue
Acklam
Middlesbrough
TS5 8PG
Tel: (01642) 818858
E-Mail: hazel_pearson@middlesbrough.gov.uk

Ref: HP/JL
28th November 2014

FAO: Tim Hodgkinson
Licensing Department
Middlesbrough Council

Dear Tim

Re: Coronation Service Station Application

Although the service station is not in our ward, we are concerned about the application for both an alcohol licence 6.00am to 11.00pm and the licence to provide night refreshment till 5.00am. We are concerned that there are already 2 public houses and three off licences within a very short distance of the service station and a recent application was turned down.

Litter from the existing nearby shopping parade is already a nuisance in our ward and we feel that the provision of late night refreshments will only add to this problem as people use Kader ward as a route to other areas of the town, notably Trimdon Avenue. Hot food litter is already deposited on this route.

Should the night time refreshments licence be granted we are worried that alcohol may be served at the same time. Therefore, we ask that the application be refused on the grounds of the prevention of crime and disorder and public nuisance.

Yours sincerely

Hazel Pearson O.B.E.

R. Arundale

Cllr Mrs Hazel Pearson OBE, LLM

Cllr Ron Arundale

CONSERVATIVE COUNCILLORS FOR KADER WARD

PROVIDE

05 DEC 2014

04.12.14

DEAR SIR

I WISH TO OBJECT TO THE APPLICATION FOR A LICENCE FOR THE SALE OF ALCOHOL BETWEEN THE HOURS OF 0600 AND 2300 DAILY.

THERE ARE ALREADY THREE OUTLETS AND A PUBLIC HOUSE IN CLOSE PROXIMITY SELLING ALCOHOL WHICH I THINK IS QUITE SUFFICIENT.

I ALSO THINK IT IS QUITE INAPPROPRIATE FOR A PETROL STATION TO BE SELLING ALCOHOL AS IT MAY ENCOURAGE DRINK DRIVING.

I HOPE THE LICENSING AUTHORITY WILL SEE SENCE AND REJECT THE PROPOSED APPLICATION.

YOURS SINCERELY

A. JONES (MR)

REF CORONATION SERVICE STATION

245 ACKLAM ROAD

MIDDLESBROUGH

TS5 7BW

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)

Jayne Bryan

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	
Coronation Service Station, 245 Acklam Road	
Post Town Middlesbrough	Post Code TS5 7BW
Name of premises licence holder or club holding club premises certificate (if know)	
Number of premises licence or club premise certificate (if known)	

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"/>
------------------	----------------------

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

(C) DETAILS OF RESPONSIBLE AUTHORITY MAKING REPRESENTATION

Name and Address	CHIEF CONSTABLE OF CLEVELAND POLICE C/O POLICE SERGEANT 944 HIGGINS MIDDLESBROUGH POLICE HQ BRIDGE STREET WEST MIDDLESBROUGH TS2 1AB
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Telephone Number (If any)	01642 303175
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 an application to grant a new premises licence to allow the sale of alcohol off the premises from 06:00 hours to 23:00 hours Monday to Sunday, and the provision of late night refreshment from 23:00 hours to 05:00 hours Monday to Sunday. Cleveland Police wish to make representations for the following reasons:

Cleveland Police are concerned by this application due to the fact that the premises is situated in an area which already suffers from alcohol related crime and disorder and youths congregating in the vicinity fuelled with alcohol. The problem has been so bad in the area that specific Police Operations have been required to tackle the problems of anti social behaviour, which has included violence and criminal damage to residents property.

A further premises opening for the sale of alcohol in the area may well exacerbate the existing problems as there is a close link between alcohol and anti-social behaviour. The petrol station is situated in close proximity to 10 other licensed premises and the locality also has a number of dependant drinkers.

The opening of another licensed premise will result in further undermining of the public nuisance objective in that it will have a detrimental effect on the lives of nearby residents who are already being impacted upon.

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 will be provided 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	Jayne Bryan	Date	11 th December 2014
Capacity	Police Constable		

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)	

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.