

**FOR THE CHAIR AND MEMBERS OF
THE LICENSING SUB-COMMITTEE
FOR 14 JUNE 2016**

APPLICATION FOR PREMISES LICENCE

Applicant: Adil Rashid

Ref.No. OL/16/12

Premises: 2 Gresham Road, Middlesbrough

Application received: 20 April 2016

Summary of Proposed Licensable Activities:

Supply of Alcohol – 8am to 10.30pm Monday to Sunday

Full details of the application 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 – 5 May 2016

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 commercial premises located close to residential properties in a predominantly residential area of the town. The premises is located in the Newport Ward and is therefore located within the Council's Cumulative Impact Area in relation to Off Licences. A location plan is attached at Appendix 2.

5. The Representations

On 24 April 2016 a representation was received from Councillor Linda Lewis and Councillor Zafar Uddin objecting to the application on the grounds that granting the licence would impact the 4 licensing objectives. A copy of that representation is attached at Appendix 3.

On 18 May 2016 a representation was received from Cleveland Police which objected to the application on the grounds of the prevention of crime and disorder and the prevention of public nuisance. A copy of that representation is attached at Appendix 4.

On 18 May 2016 a representation was received from Middlesbrough Council's Public Health Officer which objected to the application on the grounds that it did not demonstrate how the Licensing Objectives would be upheld, particularly in relation to the prevention of crime and disorder, public safety and the protection of children from harm. A copy of that representation is attached at Appendix 5.

6. Responsible Authorities

Following consultation with the Council's representative from Public Health the Applicant's legal representative forwarded information to the Licensing Section in relation to conditions they would be willing to add to their operating schedule. That information is attached at Appendix 6.

7. Licensing Policy

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

Prevention of Crime and Disorder	Page 19
Public Safety	Page 24
Prevention of Public Nuisance	Page 26
Protection of Children From Harm	Page 29
Cumulative Impact Policy	Page 37

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

8. Guidance to the Licensing Act 2003

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

Prevention of Crime and Disorder	Page 6
Public Safety	Page 7
Public Nuisance	Page 8
Protection of Children from Harm	Page 10
Cumulative Impact Areas	Page 86

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

8. Members' Options

Members may consider the following options:

- Grant the application subject to conditions consistent with the operating schedule modified to such extent as considered appropriate for the promotion of the licensing objectives and mandatory conditions if applicable. (Conditions are deemed to be modified if any of them is altered, omitted or any new condition is added).
- Reject 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

For admin use only:

Decision:

Reasons:

Middlesbrough Council

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 **Mr Adil Rashid**

(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 European Food Store 2 Gresham Road			
		<div style="border: 1px solid black; padding: 5px; text-align: center;"> MIDDLESBROUGH COUNCIL 20 APR 2016 LICENSING </div>	
Post town	Middlesbrough	Postcode	TS1 4LW

Telephone number at premises (if any)	07714 528 181
Non-domestic rateable value of premises	£NOT LISTED

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | | | |
|----|---|-------------------------------------|-----------------------------|
| a) | an individual or individuals * | <input checked="" type="checkbox"/> | please complete section (A) |
| b) | a person other than an individual * | | |
| | i. as a limited company | <input 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 | <input type="checkbox"/> | please complete section (B) |
| e) | the proprietor of an educational establishment | <input type="checkbox"/> | 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 checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname RASHID			First names ADIL SHARIF		
I am 18 years old or over			<input checked="" type="checkbox"/> Please tick yes		
Current postal address if different from premises address		24 Anderson Road			
Post town	Stockton on Tees			Postcode	TS17 7EW
Daytime contact telephone number			07714 528 181		
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?

DD		MM		YYYY			
1	0	0	0	5	0	1	6

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

DD		MM		YYYY			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please give a general description of the premises (please read guidance note 1)

Small retail shop on the ground floor trading as convenience store situated on a side road in a residential area.

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 any that apply

- 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)

x

In all cases complete boxes K, L and M

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"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
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)			Will the exhibition of films 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			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 4)
Wed			
Thur			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 (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
Mon			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thur			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)	
Fri				
Sat			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 (please read guidance note 5)	
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					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri			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)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded 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					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
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"/>
				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 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

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place 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 entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)		
Fri			<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)		
Sat					
Sun					

I

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	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed					
Thur			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Fri					
Sat					
Sun					
			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 (please read guidance note 5)		

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (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	08.00	22.30			
Tue	08.00	22.30			
Wed	08.00	22.30			
Thur	08.00	22.30	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)		
Fri	08.00	22.30			
Sat	08.00	22.30			
Sun	08.00	22.30			

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

Name Mr Adil Shariff Rashid	
Address 24 Anderson Road Stockton on Tees	
Postcode	TS17 7EW
Personal licence number (if known) TBA	
Issuing licensing authority (if known) Stockton 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).
NONE

L

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	08.00		
		22.30	
Tue	08.00		
		22.30	
Wed	08.00		
		22.30	
Thur	08.00		
		22.30	
Fri	08.00		
		22.30	
Sat	08.00		
		22.30	
Sun	08.00		
		22.30	
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)			

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

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

CCTV installed at the premises to cover the internal customer area and the front external area of the premises. All images to be retained for a minimum of 31 days and to be made available on request to authorised officers. The premises are secured and alarmed when closed.

b) The prevention of crime and disorder

Spirits of high ABV will be sold behind the counter.

When the DPS is not on duty a contact telephone number will be available at all times.

Records of incidents will be recorded in an Incident log and retained on the premises for 12 months. The premises will operate and record all Incidents of criminal activities, anti-social behaviour and injuries to persons using the following Compliance log books Customer Refusal, Authorisation of Alcohol, ID Signature to assist the police and authorities in carrying out their investigations. All log books are fit for purpose and will be retained on the premises for 12 months.

c) Public safety

No risk has been assessed under the Licensing Act 2003

d) The prevention of public nuisance

The premises will display quiet notices asking customers to leave the area quickly and quietly.

e) The protection of children from harm

The premises will adopt the Challenge 25 policy together with an Age Verification training scheme. The training subject matter will consist of underage sales, checking ID, proxy sales, basic conflict management and relevant areas of the Licensing Act 2003 with penalties for breach. Refresher training will be carried out every 12 months. All training records to be stored on the premises and available for inspection by Authorised Officers.

The only ID that will be accepted is a valid passport, British Driving Licenses and National ID cards as per government guidelines.

The premises will also maintain an ID signature log book as an additional support. All refusals of sale for alcohol to suspected underage / drunk persons will be entered in a log book. Additional signage regarding proxy sales will be displayed near the alcohol sales areas.

Notices will be displayed to this effect in prominent positions in the shop.

Checklist:**Please tick to indicate agreement**

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

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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	<i>June Clarke - JMC</i>
Date	Friday 8 th April 2016
Capacity	Agent 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)

**June Clarke
Licensing Consultant
JMC Licensing Consultants
Warrington Business Park
Long Lane**

Post town	Warrington	Postcode	WA2 8TX
Telephone number (if any)	01925 419684 M: 07834 529 712		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) licensinghouse@me.com			

Consent of individual to being specified as premises supervisor

Mr Adil Sharif RASHID

I

[full name of prospective premises supervisor]

of

**24 Anderson Road
Stockton on Tees
TS17 7EW**

[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

Application for the grant of a new Premises Licence under S17 of the Licensing Act 2003

[type of application]

by

Mr Adil Sharif RASHID

[name of applicant]

relating to a premises licence **Tba**

[number of existing licence, if any]

for

**European Food Store
2 Gresham Road
Middlesbrough
TS1 4LW**

[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

Mr Adil Sharif RASHID

[name of applicant]

concerning the supply of alcohol at

European Food Store

2 Gresham Road

Middlesborough

TS1 4LW

[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 Council

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

Signed



Name (please print)

Mr Adil Sharif RASHID

Date

25th March 2016

Licensing department

DATE 26th April 2016

Re: European food store, 2 Gresham rd Middlesbrough.

Dear sirs,

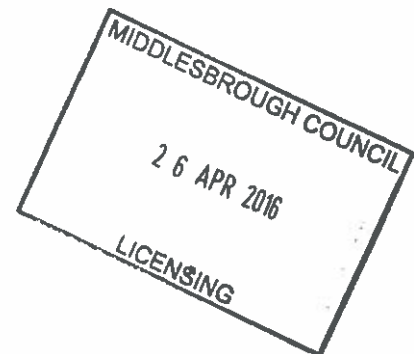
Myself and Councillor Uddin strongly object to this licensing application to sell alcohol off the premises for the above Premises.

As Newport ward is situated in a wider cumulative impact area, consisting of Central ward, Newport ward, North Ormesby ward, Park ward and Longlands/Beechwood ward, we feel that if the license is granted then surely all of the 4 licensing objectives would be undermined.

The town centre wards are over subscribed with off licenses and residents are fully aware of the ASB that is associated with it.

Yours faithfully

Councillor Linda Lewis :
LABOUR COUNCILLOR FOR CENTRAL WARD



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)

Emma Price

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

2 Gresham Road

Post Town

Middlesbrough

Post Code

TS1 4LW

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

Mr. Adil Rashid

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)

This representation relates to the following licensing objective(s)

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

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

An application has been made for a premises licence to be granted for 2 Gresham Road, Middlesbrough. The application is for the off premises sale of alcohol Monday-Sunday between the hours of 08:00-22:30hrs. The applicant is a Mr. Adil Sharif Rashid.

Cleveland Police make representations in relation to the application for the following reasons:

The premises are located in a busy residential area within Middlesbrough Town Centre. This area Middlesbrough Borough Council has recently declared as a cumulative impact zone due to the high proportion of licensed premises located in the area.

It is therefore the opinion of Cleveland Police that the onus is on the applicant to demonstrate that there will be no negative cumulative impact on the licensing objectives (see R (ON THE APPLICATION OF JD WETHERSPOON) v GUILDFORD BOROUGH COUNCIL. 2006.

The area which the premises is intended already suffers problems in relations to crime and anti-social behaviour; much of it being related to alcohol. It is Cleveland Police's belief that should the Premises Licence be granted this will only contribute to the on going issues suffered by local residents of this locality.

Cleveland Police believe that the applicant has not addressed these concerns in the Operating Schedule and subsequently believe that should the Premises Licence be granted then the Prevention of Crime and Disorder and Prevention of Public nuisance objectives will be undermined.

Please provide as much information as possible to support the representation. (Please read guidance note 2)

Should the application not be withdrawn Cleveland Police will provide further evidence.

Please
Tick ✓

Have you made any representation relating to these premises before?

☐

Day

Month

Year

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.



Community Protection

Neighbourhoods and Communities

Tel: (01642) 245432

Mr J Hodgson
Senior Licensing Officer
Public Protection Service
Licensing Office
Ground Floor
Civic Centre
MIDDLESBROUGH
TS1 1QP

Direct Line: (01642) 728717
Fax: (01642) 728960
Our Ref: 439081/SUP/LE6
Your Ref:
When telephoning please ask for:
Fiona Helyer
18 May 2016

Dear Mr Hodgson,

Application for Premises Licence

Re: European Food Store, 2 Gresham Road, Middlesbrough, TS1 4LW

I act on behalf of the Director of Public Health as the Responsible Authority for Health and I have been consulted on the above application.

I am writing to advise you that I would like to make a representation against the granting of the above application and currently recommend that the application is refused on the grounds that it does not demonstrate how the licensing objectives will be upheld, particularly in relation to crime and disorder, public safety and the protection of children from harm.

Please find attached evidence to support this representation.

I attach correspondence sent to the applicant.

Yours sincerely,

Fiona Helyer
Public Health Officer
Responsible Authority for Health.

Evidence presented by Middlesbrough Council, responsible authority for health, against the application for a premises licence in respect of premises situated at 2 Gresham Road, Middlesbrough under the Licensing Act 2003

The Director of Public Health, as the Responsible Authority for Health, is making a representation to this application on the grounds of Crime and Disorder, Public Safety, Public Nuisance and Protection of Children from Harm. The area in which these premises are situated suffers from high levels of alcohol related Crime and Disorder, Anti-Social Behaviour and there are high numbers of wholly attributable alcohol related hospital admissions to James Cook Hospital. It is our opinion that the granting of a new premises licence in this area would undermine the Crime and Disorder, Public Safety, and Protection of Children from Harm licensing objectives and will exacerbate the problems already experienced.

Currently, Middlesbrough has the highest rate within the Northeast region of alcohol related hospital admissions for 2015/16 at 2,439 per 100,000, which is 23.9% higher than the regional average and 48.8% higher than the national average. Alcohol related data and intelligence has been gathered for the Newport ward. In 2014/2015, there were 209 wholly attributable alcohol related admissions from the Newport Ward to an inpatient bed at James Cook University Hospital. This figure is 53% higher than the second most offending ward in Middlesbrough, and 204% higher than the average alcohol related hospital admissions rate over the other 19 wards within Middlesbrough.

There is also a high density of off licensed premises situated within Newport ward – approximately 21 in total. Approximately 60% of off licensed premises are situated within 5 ward areas of Middlesbrough: Central, Newport, Park, Longlands and Beechwood and North Ormesby. During 2014/2015 a high proportion of the alcohol related crimes, wholly attributable hospital admissions and crime and disorder incidents were recorded from these ward areas. This, together with the high density of off licence premises prompted the need for a Cumulative Impact Policy which was included in Middlesbrough Council's Licensing Policy 2016-2021 which was adopted on 7th January 2016. This Policy requires off licence premises applications to demonstrate how they will not add to existing crime and disorder issues within these wards.

This premise is located within the Newport ward, which is one of the most deprived areas within Middlesbrough. There is high unemployment, low education attainments, a predominance of privately rented properties, some of the poorest in Middlesbrough, and a high prevalence of ill health. Alcohol arrest data shows that Newport ward is a hotspot area for alcohol related crime and that a high number of these cases have involved people drinking in the home. Some of these cases have also involved a number of adults who are known to the authorities and who are high risk/dependent drinkers. These individuals choose to congregate and drink in the streets within the area, including children's parks/playgrounds. Irresponsible sales and the availability of cheap alcohol fuel crime and disorder.

A survey carried out over the last 12 months obtained information regarding the type of alcohol sold, in particular higher strength beers, lagers and ciders sold from the off licences in the Newport ward. Some of these products cost as little 13p per unit of alcohol. (The Chief Medical Officer recommends a minimum unit price of 50 p per unit) and are highly attractive to risky or dependent drinkers. There are clear links between the availability of cheap alcohol, antisocial behaviour and crime and disorder. Whilst it is not illegal to sell high strength alcoholic products there is clearly a need to ensure that all alcohol products are sold responsibly to ensure the licensing objectives are upheld.

Several attempts have been made to contact the applicant, Mr Adil Rashid to discuss this application and to obtain further information on how the licensing objectives will be upheld as the application does not demonstrate how his premises are not going to add to the existing problems in the area. A number of telephone messages have been left and a letter has been sent to the applicant's home address asking him to make contact with the Council. Mr Rashid has failed to respond.

The area in which this premise is situated suffers from high levels of alcohol related crime and ASB, there is a high density of off licensed premises and a Cumulative Impact Policy in place. This application does not demonstrate how the proposed premises will not negatively impact on the licensing objectives.



Edward Kunonga
Director of Public Health
Middlesbrough Council

Dated: 18 May 2016

- 1) The premises will not stock, display or sell any lager, beer, cider or perry product with an ABV content above 6.5%.
- 2) There will be no sales of single canned lagers, beers and ciders from the premise. Such products will be sold in a 4 pack only.
- 3) The Premises Licence Holder/ Designated Premises Supervisor will participate in any 'Responsible Retailing' scheme and any relevant training which the Local Authority provide.
- 4) The Premises Licence Holder/Designated Premises Supervisor will participate in any Local Off Licence Forums held by the Local Authority.
- 5) Any staff employed at the premises will be provided with training on first appointment and on a regular basis thereafter. Training will include information on preventing the sale of alcohol to somebody who is drunk or believed to be buying alcohol for a person who is drunk.
- 6) A written record will be kept of all training carried out. This record must be kept on the premises and made available for inspection by a responsible authority.
- 7) All alcohol is to be displayed / stored behind the counter.
- 8) The premises is to maintain a refusals book to record the details of incidents where a member of staff has refused to sell alcohol to a person suspected of being drunk or buying for someone who is drunk.
- 9) The Premises Licence holder / Designated Premises Supervisor or nominated representative shall regularly monitor the refusals book and make a record of these checks. The book must be made available to a Police Constable / Authorised Officers of the Licensing Authority on request.
- 10) Any person who is authorised to sell alcohol at the premises will be provided with training on first appointment and every 6 months thereafter. Training will include information on how to prevent underage sales. A written record will be kept of all training provided and this record will be kept on the premises for inspection by any Responsible Authority.
- 11) There shall be displayed on the premises such information as to inform and advise customers of potential consequences of excessive alcohol consumption domestic abuse, safe drinking levels, sexual health.
- 12) A Personal Licence holder must be on the premises at all times when open to the public.