# Middlesbrough Council

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## **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

Betor	e Completing This Forr	n Please Read The G	uidance Notes At The End Of The Form	•
inside	are completing this form by the boxes and written in b eted form for your records.	hand please write legible lack ink. Use additionary	y in block capitals. In all cases ensure that you list sheets if necessary. You may wish to keep	our answers are a copy of the
l (Insei	t name) CLEVELANI	POLICE	·	
Wish certifi	o make representation a cate (delete as applicable	bout the application fo	r variation/grant for a premises licence/clul	o premises
PART	1 – PREMISES OR CLU	JB PREMISES DETAI	LS	
Posta	Address of Premises or	Club Premises, or if n	one, ordnance survey map reference or de	scription
1	IER PARKEND MEDICA DALE ROAD	L CENTRE		
Post 7	own		Post Code	
MIDD	ESBROUGH	•	TS3 7EA	<u>.</u> .
Name	of premises licence hold	er or club holding club	premises certificate (if known)	
Numb	er of premises licence or	club premise certificat	te (if known)	····
PART	2 – DETAILS OF PERS	ON MAKING REPRES	SENTATION	
l am				
				Please Tick ✓
1)	an interested party (ple	ease complete (A) or (I	3) below)	
	a) a person living in th	e vicinity of the premis	ses ·	
	b) a body representing persons living in the vicinity of the premises			
-	c) a person involved in business in the vicinity of the premises			
	d) a body representing	g persons involved in b	ousiness in the vicinity of the premises	
2)	a responsible authority	(please complete (C)	below)	□x
3)	a member of the club t	o which this represent	ation relates (please complete (A) below)	

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

Mr Mrs Miss Ms Other Title (for example, Rev)
Surname First Names
·
· L L L L L L L L L L L L L L L L L L L
I am 18 years old or over Yes (Please Tick)
Current Address
Post Town Post Code
Daytime contact telephone number
E-mail address (optional)
(B) DETAILS OF OTHER PARTY MAKING REPRESENTATION (e.g. Body or Business)
Name and Address
· ·
<u> </u>
Telephone Number (If any)
E-Mail address (optional)
(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

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	Χ
2.	Public safety	
3.	The prevention of public nuisance	X
4.	The protection of children from harm	

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

This is a new application made under the licensing act 2003. The applicant is seeking the provision of recorded music and the supply of alcohol from 07 00hrs until 23 30hrs, seven days a week.

Cleveland Police wish to make representations to this application for the following reasons: The area this premise is situated in, does suffer from alcohol related crime/disorder and anti social behaviour. It's in current format, Cleveland Police believe that if this premises license is granted, the licensing objectives will be undermined, however, If the application is amended to reflect the following, Cleveland Police feel that the licensing objectives would not be undermined and would withdraw representations, The operating schedule is to be amended so that the provision of recorded music and supply of alcohol will be conducted between 08 30hrs and 23 00hrs, Monday to Saturday and between 10 00hrs and 22 30hrs on Sundays and not between 07 00hrs and 23 30hrs, seven days a week. All the conditions on the licence application form that have been offered by the applicant, are to be removed and replaced with the following,

- A digital Closed Circuit Television System (CCTV) will be installed and maintained in good working order and be correctly time and date stamped.
  - > The system will incorporate sufficient built-in hard-drive capacity to suit the number of cameras installed.
  - > CCTV will be capable of providing pictures of evidential quality in all lighting conditions, particularly facial recognition.
  - > Cameras will encompass all ingress and egress to the premises, outside areas and all areas where the sale/supply of alcohol occurs.
  - > The system will record and retain CCTV footage for a minimum of 31 days
  - The system will record for 24 hours a day.

- > The system will incorporate a means of transferring images from the hard-drive to a format that can be played back on any desktop computer.
- > The Digital recorder will be password protected to prevent unauthorised access, tampering, or deletion of images.
- > There will be at all times, when the premises is open, a member of staff on duty with access to the CCTV system who is trained in the use of the equipment.
- ➤ Upon receipt of a request for a copy of CCTV footage from Police, Licensing Officers or any other Responsible Authority, the member of staff will produce the footage within 24 hours or less if urgently required for investigations of serious crime.
- CCTV footage must be made available to be viewed by the Police, Licensing Officers or other Responsible Authorities on request during an inspection of or visit to the Premises
- An incident book must be kept at the Premises and maintained up to date (no later than 24 hours after the incident) at all times and will record the following:
  - Time date and details of all incidents/complaints of crime and disorder or anti-social behaviour
  - All crimes reported to the venue.
  - > Any faults in the CCTV system, searching equipment or scanning equipment
  - Any visit by a relevant authority or emergency service
- The incident book must be made available to Police, Licensing Officers and all other Responsible Authorities on request or during an inspection.
- The premises will not stock, display or sell any lager, beer, cider or perry product with an ABV content above 6.5%.
- The Premises will not sell any single cans of lager, beer or cider
- The Premises Licence Holder/ Designated Premises Supervisor will participate in any 'Responsible Retailing' scheme and any relevant training / campaigns which the Police or Local Authority provide or recommend.
- The Premises Licence Holder/Designated Premises Supervisor will participate in any local Off Licence forums held by the Local Authority.

• A	Personal Licence holder must be on t	he prem	ises at all	times whe	n open to	)	
th	e public.						
			·				
Please pro	vide as much information as possible to supp	ort the rea	resentation	/Please read	d quidanco	noto 2\	
r leade pro	vide as much information as possible to supp	ort trie rep	resemadon	. (Flease lea	u guidance	note z)	
Should the	e above not be agreed then further evider	nce will b	e submitte	<u>d.</u>	;		
						ease ck ✓	
Have you	made any representation relating to these	e premis	es before?				
	•	Day	Day Mont		Year	ear ====================================	
If Yes, ple	ease state the date of that representation						
If you have	made representation before relating to these	premises	please state	e what thev	were and v	when	
you made		•		,			
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						•	
		<u>-</u>			•		
A How Wo C	ollect And Use Information						
By completing the application	g this document you give Middlesbrough Council the auth n. In order to process the application we may need to ch government departments.	ority to colle eck this info	ct and retain in mation with otl	formation abou her enforcemen	t you for the part agencies, lo	purpose of ocal	
fraud. We ma	ect the public funds we handle and so we may use the in ay also share this information with other enforcement age h Council will not disclose information about you unless t	ncies includ	ing those orgar	ed on this form t nisations which	o prevent and handle public	d detect funds.	
information th	h Council is the Data Controller for the purposes of the Date Authority holds about you or the way the Authority use: Melrose House, 1 Melrose Street, Middlesbrough, TS1 2Y	s that inform	on Act. If you vation please co	vant to know mo ontact the Inform	ore about the nation Securi	ty Officer,	
	•						
Part 3 – Si	gnatures (Please read guidance note 3)						
	of representative or representative's solicitor of ag on behalf of the representative please state			d agent. (Se	ee guidano	e note	
Signature	PC 1845 Jason Arbuckle		Date	28/10/201	7	•	
Capacity	Police Constable Cleveland Police Licensing	g Unit	J				

Contact name (where not previously given) and address for correspondence associated with this

representation. (Please read guidance note 5)	
Middlesbrough Police HQ, Bridge Street West,	
Post Town	Post Code
Middlesbrough	TS2 1AB

Telephone Number (if any)	01642 303175	
E-mail Address (optional)	Jason.arbuckle@cleveland.pnn.police.uk	

#### **Notes for Guidance**

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