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Blackpool Council

22 July 2014

To: Councillors Brown, Hutton and Mrs Taylor

The above members are requested to attend the:

LICENSING PANEL

Tuesday, 29 July 2014 at 11.30 am in Committee Room A, Town Hall, Blackpool

AGENDA

1 APPOINTMENT OF CHAIRMAN

To appoint a Chairman for the meeting.

2 DECLARATIONS OF INTEREST

Members are asked to declare any interests in the items under consideration and in doing so state:-

- (1) the type of interest concerned
- (2) the nature of the interest concerned; and
- (3) whether they have or have not sat on a Planning Committee which has previously considered a planning application in respect of a licensed premises which is also subject to consideration for a premises licence as part of the agenda for this meeting.

If any Member requires advice on declarations of interests, they are advised to contact the Monitoring Officer in advance of the meeting.

(Members are asked to also pay particular attention to the guidance sheet on interests supplied with the agenda).

3 PROCEDURE FOR THE MEETING

The Chairman of the Panel will summarise the procedure and announce the equal maximum amount of time for each party to speak for the hearing.

- A. Items 1 and 4 (b) will be undertaken in private session by the Panel and not in the Meeting Room.
- B. Items 2, 3, 4(a) and 4(c) will be recommended to the Panel to be held in public.
- C. The Panel may decide to exclude the public from all or part of a hearing where it considers that the public interest in so doing outweighs the public interest in the hearing, or that part of the hearing, taking place in public. (This includes a party and any person assisting or representing a party)

4 APPLICATION FOR A PREMISES LICENCE- CENTRAL NEWS

(Pages 1 - 32)

- a. APPLICATION AND REPRESENTATIONS SUBMITTED. To consider the attached report
- b. DETERMINATION OF THE APPLICATION FOR A PREMISES LICENCE FOR Central News
- c. ANNOUNCEMENT OF THE DECISION FOR THE APPLICATION FOR A PREMISES LICENCE FOR Central News

Venue information:

First floor meeting room (lift available), accessible toilets (ground floor), no-smoking building.

Other information:

For queries regarding this agenda please contact Lennox Beattie, Executive and Regulatory Manager, Tel: 01253 477157, e-mail lennox.beattie@blackpool.gov.uk

Copies of agendas and minutes of Council and committee meetings are available on the Council's website at www.blackpool.gov.uk.

Report to:	Licensing Panel
Decision or Item number	4
Relevant Officer:	Sharon Davies, Principal Solicitor Licensing
Date of Meeting:	29 th July 2014

APPLICATION FOR A PREMISES LICENCE- CENTRAL NEWS

1.0 Purpose of the report:

1.1 To consider an application for a premises licence from Central News and the relevant representations from members of the public.

2.0 Recommendation(s):

2.1 Members will be requested to determine the application.

3.0 Reasons for recommendation(s):

- 3.1 Once an objection has been received the application and any relevant representation must be considered by the Licensing Panel.
- 3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council?
- 3.2b Is the recommendation in accordance with the Council's approved Yes budget?
- 3.3 Other alternative options to be considered:

None, the application and the representations must be considered.

4.0 Background Information

- 4.1 On 2nd June 2014, the licensing service received an application for a new premises licence at 41-43 Central Drive Blackpool. The application requests permission to sell alcohol for consumption off the premises 07.00 00.00 hours daily. A copy of the application is attached.
- 4.2 The applicant is Ismail Ezzat.
- 4.3 Representations have been received from the public.

4.4 National Guidance

Section 9. Determining applications is relevant.

- 9.33 As a matter of practice, licensing authorities should seek to focus the hearing on the steps considered appropriate to promote the particular licensing objective or objectives that have given rise to the specific representation and avoid straying into undisputed areas.
- 9.34 In determining the application with a view to promoting the licensing objectives in the overall interests of the local community, the licensing authority must give appropriate weight to:
- 1. The steps that are appropriate to promote the licensing objectives
- 2. The representations presented by all the parties
- 3. This guidance
- 4. Its own statement of licensing policy

4.5 **Local Guidance**

The section on cumulative impact is relevant. This premises is situated within one of the four wards covered by the off-licence saturation area. This means that the starting point is that the panel should refuse the application unless they are satisfied that the application will not add to the existing cumulative impact being experienced.

The policy goes on to state that applicants for licences within the off-licence saturation area will be expected to cover the issues detailed below in their operating schedule. Failure to do so may result in the refusal of the application:

- 1. Details of the proof of age scheme to be implemented and proposals for staff training
- 2. Percentage of premises to be used for the sale of alcohol, including details of other items to be sold
- 3. The applicant's policy on the sale of low value/high alcohol products and any drinks discounting that would be adopted.

4.6 In reaching its decision the panel should take into account the fact that Mr Ezzat already holds a licence to sell alcohol at 41 Central Drive. The application has been made because he has bought the neighbouring premises and is wishing to extend the floorspace of the shop. The reality of the situation therefore is that there will not be an additional licensed premises in the area if this licence is granted.

The panel should however be aware that the new application is requesting longer hours for the sale of alcohol. Currently the licence for 41 Central Drive permits the sale of alcohol 08.00 - 23.00 weekdays and 10.00 - 22.30 on Sundays. the new application seeks permission for alcohol sales to take place 07.00 - 00.00 daily, a significant increase in hours. The panel should only consider granting a licence for these extened hours, if Mr Ezzat can satisfy them that the additional hours will not bring about an increase in the problems already being experienced in the area.

The Police have agreed the following conditions with the applicant which will be added to the licence if it is granted:

- 1. An authorisation, signed and dated by the Designated Premises Supervisor, shall be kept at the premises showing all persons authorised by them to make sales of alcohol at the premises. All staff involved in sales will be at least 18 years of age and will receive training to promote the licensing objectives. All training to be documented and records made available on request to a Police Officer or any authorised officer.
- 2. All staff shall have received suitable training in relation to the proof of age scheme to be applied upon the premises. Records to evidence this shall be made available to an authorised officer upon request. Refresher training will take place at 3-6 monthly intervals. The training will be documented and made available to the authorities on request.
- 3. There will be a "Challenge 25" scheme in operation at the premises, requiring any individual who appears to be under the age of 25 to provide identification to prove that they are over the age of eighteen. In the event that the individual is unable to provide said identification, then the sale of alcohol will be refused. The only forms of identification which we be accepted as proof of age are:
- a valid UK Passport;
- a valid UK photocard driving licence;
- A PASS card; and / or,
- any other nationally or locally approved form of identification which may be introduced in the future

- 4. CCTV will be installed internally and externally at the premises and will comply with the following:
- a) The CCTV system shall be installed, maintained and operated to the reasonable satisfaction of Lancashire Constabulary.
- b) The system will incorporate a camera covering each of the entrance doors and will be capable of providing an image which is regarded as identification standard.
- c) The system will display on any recording the correct time and date of the recording.
- d) The system will make recordings during all hours the premises are open to the public.
- e) VCR tapes or digital recording shall be held for a minimum of 31 days and 28 days respectively after the recording is made and will be made available to the Police or any authorised persons acting for Responsible Authority for inspection upon request.
- f) The system will, as a minimum, record images of the head and shoulders of all persons entering the premises.
- 5. A staff member who is conversant with the operation of the CCTV system will be on the premises at all times the premises are open to the public. This staff member will be able to show recent data or footage with the absolute minimum of delay when requested to by a Police Officer
- 6. Appropriate signage alerting customers to CCTV recording shall be displayed in conspicuous positions on the premises.
- 7. Signage will be displayed at the exit of the premises requesting to remind customers that drinking on the street is prohibited.
- 8. All refusals of sales of alcohol will be recorded and such record will be available for inspection by a Police Officer or authorised person on request.

Yes

4.3 Does the information submitted include any exempt information?

4.4 List of Appendices:

Appendix 4a Application for premises licence

Appendix 4b Representations from Members of the Public

- 5.0 Legal considerations:
- 6.1 Please see national policy in the background information.
- 7.0 Human Resources considerations:
- 7.1 None

- 8.0 Equalities considerations:
- 8.1 None
- 9.0 Financial considerations:
- 9.1 None



Blackpool Council

0 2 JUN 2014

APPLICATION FOR A NEW PREMISES LICENCE

Applicant Name(s): ISMUIL EZZAT

Built Environment

Licensing Service Blackpool Council Municipal Buildings, PO Box 4 Blackpool, FY1 1NA Contact

T: (01253) 47 8572 / 8589 F: (01253) 47 8372

www.blackpool.gov.uk



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

answers are ins for your records	ide the boxes and written in black ink. You may	wish to keep	a copy of the complete	ed form
I/We IS	MAILEZZAT			
	[insert name of applicant/s]		
described und	emises licence under Schedule 17 of the der Part 1 below and I/we are making this nority in accordance with section 12 of th	application	n to you as the relev	emises vant
Part 1 - Pro	emises Details			
	Postal address of premises or cluor if none the ordinance survey map re	ub premises eference or	s if any, description.	
Premises Nam	· Central neu	us		
Premises	41-43 Central	Driv	e	
Address	BLACKPOOL	Post Cod	e fyll	5
Telephone Nur	nber of premises (if any)	3206	5033	
E-Mail Address	1shy 80 @ Hotm	ail.c	OUK	
Non-Domestic R	ateable Value of Premises	£		
Part 2 – Ap _l	olicant details			
In what capacity	are you applying for a licence?	Please tick:		
a) An individua	I *	0	Complete Section A	
b) A person oth	ner than an individual*			
1.	As a limited company		Complete Section B	
II.	As a partnership		Complete Section B	
III.	As an unincorporated association		Complete Section B	
IV.	Other (for example a statutory corporation)		Complete Section B	
c) A recogn	ised Club		Complete Section B	

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e) The proprietor of an educational establishment

d)

A charity

Page 2 of 16

Complete Section B

Complete Section B

f) Health	Service Body		Complete Section B						
Care S	who is registered under Part 2 of the Standards Act 2000 (c14) in respect of an endent hospital in Wales		Complete Section B						
Part 1 of the in respect (within	ga) A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent Hospital in England.								
	Officer of Police of a police force land and Wales		Complete Section B						
*If you are ap	plying as a person described in (a) or (b) pl	ease confir	m:						
			If yes please tick						
	on or propose to carry on business es the use of the premises for licensable activit	ies; or							
 I am makir 	ng the application pursuant to a								
o Sta	atutory function								
o A f	unction discharged by virtue of Her Majesty's p	rerogative							
(A) Individ	dual Applicants (fill in as applicable)								
(A) Individ	dual Applicants (fill in as applicable) Mr Mrs Miss Ms								
		mes 1	smail						
Title:	Mr Mrs Miss Ms EZZAT Forenar	T	5 M a i L Please tick						
Title:	Mr Mrs Miss Ms EZZAT Forenar	T	Please tick Day Month Year						
Title:	Mr Mrs Miss Ms EZZAT Forenar Id or over Ves No Date of Birth 20 Condon Grove	T	Please tick Day Month Year						
Title: Surname I am 18 years o	Mr Mrs Miss Ms EZZAT Forenar Id or over Yes No Date of Birt	T	Please tick Day Month Year						
Title: Surname I am 18 years o	Mrs Miss Ms EZZAT Forenan Id or over ZO CONDON GROVE BLUCKPOOL	Post Code	Please tick Day Month Year						
Title: Surname I am 18 years of the Home Address Telephone	Mr Mrs Miss Ms EZZAT Forenant of the policy of the polic	Post Code F	Day Month Year 15 09 1980 V1 5 J U						

SECOND INDIVIDUAL APPLICANT IF APPLICABLE

Title:	Mr	Mrs	Miss	Ms					
Surname						Forenames			
Date of Birth		Day	Мо	nth	Year	I am 18 years	old or over	Yes N	
Home address		Post Code							
Telephone Number		Mobile Number							
E-Mail Address									
please give an	e name	and restered n	umber	. In th	ne case	of/a partnersh	n full. Where a ip or other joint each party conc	venture (ot	
Name									
		· · · · · · · · · · · · · · · · · · ·					1		
Address									
					_/	Post	Code		
Telephone Number							/		
E-Mail Address				-					
Registered numl (where applicabl	oer e)								
Description of	applica	nt (e.g.	partne	ership	, compa	ny, unincorpo	rated association	on)	
						3 (3 ° 4 ° 4 ° 4 ° 4 ° 4 ° 4 ° 4 ° 4 ° 4 °			

Part 3 - Operating Schedule

When do you want the premises licence to start

Da	У	Mo	nth		Y	ear	
0)	0	Z	S	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
-	1	
	 	

If 5000 or more people are expected to attend the premises at any one time please state the number expected to attend

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

The premises is allocated on 41-43 central Drive, The premises will be used as a post office and a mini supermarket.

The permises is allocated on the corner of Chapel Street and central Drive.

The permises will be used for the supply of Alcohol to be used, the permises

The permises will be covered with cct u and fire Alarm.

For Anyover 18 products.

All the relevent signs will be Adeurtised

· full staff training will be given on a regular basises.

Pro	vision of	If yes please tick							
a)	A performa	ance of a	play (if ticking yes, fill in box A)						
b)	An exhibiti	on of a file	m (if ticking yes, fill in box B)						
c)	An indoor	sporting e	event (if ticking yes, fill in box C)						
d)	d) Boxing or wrestling entertainment (if ticking yes, fill in box D)								
e)	A performa	ance of liv	e music (if ticking yes, fill in box E)						
f)	Any playin	g of recor	ded music (if ticking yes, fill in box F)						
g)	A performa	ince of da	nce (if ticking yes, fill in box G)						
			imilar description to that falling if ticking yes, fill in box H)						
Sup	Provision of late night refreshment (if ticking yes, fill in box I) Supply of alcohol (if ticking yes, fill in box J)								
In a	II cases co	mplete b	ooxes K, L and M						
Stan	formance of dard timings ance note 6	s (read	Will the performance of a play take place indoors, outdoors or both? Please tick. (Read guidance note 2)	Indoors Outdoors					
Day		Finish		Both					
Moi	n		Please give further details here (please read guidance note 3						
Tue	9								
We	d		State any seasonal variations for performing plays (please	read guidance note 4)					
Thur	rs								
Fri			Mon-standard timings. Where you intend to use the premise of a play at different times to those listed in the column on (please read guidance note 5)	es for the performance the left, please list					
Sat			(please read guidance note a)						
Sun									

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

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

B

	tion of f		Will the exhibition of films take place indoors, outdoors or both? Please tick. (Read guidance note 2)				
	ce note 6)			Outdoors			
Day	Start	Finish		Both			
Mon			Please give further details here (please read guidance note	3)			
Tue							
Wed			State any seasonal variations for the exhibition of films (p	lease read guida	ance note		
Thurs							
Fri			Non-standard timings. Where you intend to use the premis- film at different times to those listed in the column on the read guidance note 5)	ses for the exhi left, please list	ibitions of (please		
Sat							
Sun							
Standar	sporting d timings e note 6)	g events (read	Please give further details here (please read guidance note				
Day	Start	Finish					
Mon			State any seasonal variations for indoor sporting events note 4)	(please read gu	idance		
Tue							
Wed							
Thurs			Non-standard timings. Where you intend to use the premeter at different times to those listed in the column on (please read guidance note 5)				
Fri							
Sat							
		I	T. Control of the con				

D

Aoxing or wrestling entertainment Standard timings (read guidance note 6)			Will the boxing or wrestling entertainment take place indoors, outdoors or both? Please tick. (Read guidance note 2)	Indoors Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please read guidance note	3)
Tue				
Wed			State any seasonal variations for boxing or wrestling ent guidance note 4)	ertainment (please read
Thurs				
Fri			Non-standard timings. Where you intend to use the prem wrestling entertainment at different times to those listed please list (please read guidance note 5)	
Sat				
Sun				

E

music	nance o		Will the performance of live music take place in outdoors or both? Please tick. (Read guidayice n	
	d timings e note 6)	(read		Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please read gu	darice note 3)
Tue				
Wed			State any seasonal variations for the performa guidance note 4)	nce of live music (please read
Thurs				
Fri			Non-standard timings. Where you intend to us of live music at different times from those lister list (please read guidance note 5)	e the premises for the performance d in the column on the left, please
Sat				
Sun				

Playin music	g of reco	orded		recorded music take place indoors, Please tick. (Read guidance note 2)	Indoors	
	d timings e note 6)				Outdoors	
Day	Start	Finish			Both	
Mon			Please give further	details here (please read guidance note	3)	
Tue						
Wed			State any seasonal note 4)	variations for playing recorded music	(please read guidance	
Thurs						
Fri				gs. Where you intend to use the premi different times to those listed in the co dance note 5)		
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G /						
	nance o	f		e of dance take place indoors, lease tick. (Read guidance note 2)	Indoors	
dance Standar	d timings	(read		loude som (route gardande note 2)	Outdoors	
guidanc	e note 6)				Cutacors	
Day	Start	Finish			Both	
Mon			Please give further	details here (please read guidance note	3)//	
Tue						
Wed			State any seasonal	variations for the performance of dance	e (please read guidance	ce
			note 4)			
Thurs						
Fri			of dance at differen	gs. Where you intend to use the premise times to those listed in the column or	ses for the performan the left, please list	ce
Sat			(please read guidance	e note o)		
			5			
Sun			,			

simila	ainment r descrip	tion to	Please give a description of the type of entertainment you v	vill be providing	1
	lling with				
	g)Standaı				
_	(read gu	idance			
note 6)					
Day	Start	Finish	Will this entertainment take place indoors, outdoors or both. Please tick. (Read guidance note 2)	Indoors	
Mon				Outdoors	
				Both	
Tue	-		Please give further details here (please read guidance note 3)		
Wed					
Thu	-		State any seasonal variations for entertainment (please read	guidance note 4	l)
Fri]		
Sat			Non-standard timings. Where you intend to use the premise at different times to those listed in the column on the left, pl	s for the enterta	ainment
			guidance note 5)	ease list (please	e read
Sun				*	
L					
1					
Late N Refres	light shment		Will the provision of late night refreshment take place indoors, outdoors or both? Please tick (Read guidance note	Indoors	
	rd timings ce note 6		2).	Outdoors	
Day	Start	Finish		Pot	
Mon			Please give further details here (please read guidance note 3)	Both	
won			rease give further details here (please read guidance note 3)	/	
Tue					
14/					
Wed					
Thu			State any seasonal variations for the provision of late night riguidance note 4)	efreshment (ple	ease read
Thu Fri			State any seasonal variations for the provision of late night riguidance note 4)	<u>efreshment</u> (ple	ease read
			State any seasonal variations for the provision of late night riguidance note 4) Non-standard timings. Where you intend to use the premises late night refreshment at different times to those listed in the please list (please read guidance note 5)	for the provisi	on of

				The state of the s
		Will the sale of alcohol be for consumption on the premises, off the premises or both? Please tick. (Read guidance note 6)	On the premises Off the premises	
Start	Finish		Both	
07:00	00,00	State any seasonal variations for the supply of alcohol (ple 4)	ease read guidar	nce note
07:00	00,00			
27:00	00,00			
07:00	00,00			
ಲಸ್ತ'ಎಲ	00,00			
07:00	00:00			
07:00	00;00			
	Start OZ;00 OZ;00 OZ;00	Start Finish (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	rd timings (read the note 6) Start Finish Start Finish State any seasonal variations for the supply of alcohol (ple 4) State any seasonal variations for the supply of alcohol (ple 4) Non-standard timings. Where you intend to use the premise alcohol at different times to those listed in the column on the	red timings (read e note 6) Start Finish

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)



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M

	e and details of the individ emises supervisor.	lual whom you wish to specify on the licence as the
Surname }	EZZAT	Forename(s) ISmaiL
State any previo	ous names	Please tick
They are 18 yea	rs old or over	Their Date of Birth Day Month Year COM 1980
Address	20 Condor C Blackpoo Pancshire	
Telephone Number	0787 3206	50 33
Email Address	Ishy 80 @ ho	stmail · co · UK
Personal Lice	nce Number (if known)	045442 PA 3942
Expiry date of	Personal Licence	11/07/2022
Issuing Licens	sing Authority (if known)	Blackpool (ouncil

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

a.	General -	all four	licensing	objectives	(b,c,d,e)	(See guidance	note 9)
----	-----------	----------	-----------	------------	-----------	---------------	---------

· CCTV

· Puplic Signs To prevent noisance

· fire Alarm

· Challange 25 Policy

· Staff fraining

· Cooperating with public Authority

· puplic notice

b) The prevention of crime and disorder

· CC TV

· Puplic notice

· Stoff Training

· Cooperating with Puplic Authority

· Following local Authorities guide Lines

· Challange 25 Policy

c) Public Safety

· CCTV · fire Alarm · Charlange ZSPolicy · Staff training · Puplic notices · Cleaning

d) The prevention of public nuisance

· Puplic signs · staff training · defuse any disorder

e) The protection of children from harm

· Challange 25 policy · Staff training · Puplic notice Display · Out of reach of over 18 products · CCTV

		If yes pl	ease tick
,	I have made or encl	osed payment of the fee	
0	I have enclosed the	plan of the premises	
•		f this application, including the plan and consent by pervisor form (if applicable), to the responsible authorities	
•	I have enclosed the be premises supervi	consent form completed by the individual I wish to sor, if applicable	
•		nust now advertise my application. (You may be asked to fore in your best interests to provide a copy of the advert partment).	
•	I understand that if I application will be re	do not comply with the above requirements my jected	
ST	ANDARD SCALE, U	ABLE ON CONVICTION TO A FINE UP TO LEVEL 5 OF NDER SECTION 158 OF THE LICENSING ACT 2003 TO OR IN CONNECTION WITH THIS APPLICATION	
Pa	art 5 – Signature	(please read guidance note 10)	
		or applicant's solicitor or other duly authorised agen gning on the behalf of the applicant please state in wh	
Sig	gned	I. CBU	
Pr	int Name	ISMail EZZAT	
Ca	pacity	owner	
Da	te	30/05/2014	
so	nere the premises lic licitor or other autho plicant please state	cence is jointly held signature of 2 nd applicant or 2 nd a prised agent. (Please read guidance note 12) If signing in what capacity.	pplicant's on behalf of the
Sig	jned		
Pri	nt Name	1110	
Ca	nacity		

Date

	where not previously given) and (Please read guidance note 13)	d address for correspondence associated with
Title:	Mr Mrs Miss Ms	
Forename(s)	ISMail EZZA	7 Surname EZZAT
Address for Correspondence associated with	Blackpool	rove
this application	Brackpool Puncshire	Post Code (X) 5JU
Telephone Number	07873206033	Mobile 07873206033
E-Mail Address	1shy 80 @ hotma	il·co:UK

Notes for Guidance

- Describe the premises. For example the type of premises, it's general situation and layout and any other information that could be relevant to the licensing objectives. Where your application includes offsupplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place is and its proximity to the premises.
- 2. Where taking place in the building or other structure please tick as appropriate. Indoors may include a tent.
- 3. For example state 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 format (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 for 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 that 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 of restricted age groups, the presence of gaming machines.
- 9. Please list here the steps you will take to promote all four licensing objectives together.
- 10. The application 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, the applicants or their respective agents must sign the application form.
- 13. This is the address that we shall use to correspond with you about this application.



In order to assist with your application under the Licensing Act 2003, Lancashire Constabulary ask if you could provide the following information, which is offered on a voluntary basis, to speed up the application process.

Full Name (inc any previous names)

ISMail EZZAT

Date AND place of birth

15/9/1480 Liver Pool

Contact telephone number

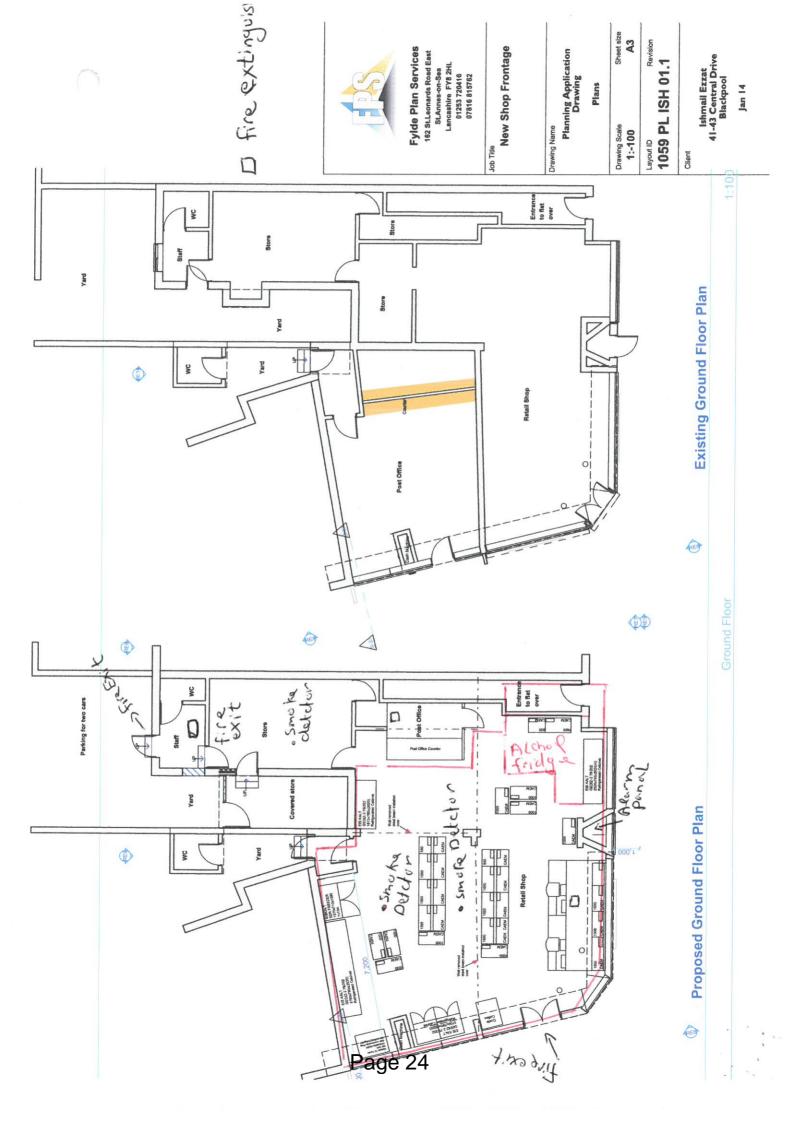
- Day 07873206033

Thanking you in anticipation

Schedule 11

Consent of an individual to being specified as a premises supervisor

Full name of the prospective premises supervisor:	Type of Licensing Application:
ISMail EZZAT	new premises
Home address of the prospective premises	
20 condor Grove, Blacks Pancshire, FXI 5JU	Pool,
Full name(s) of Premises Licence holder:	Premises Licence number (if any):
Ismail EZZAT	
Name and address of the premises to which	the application relates:
41-43 central Drive, B Lancshire, fri 505	leckpool,
to the premises licence number specified as	specified as the designated premises above by the applicant named above, relating above if any, for the premises the application ence to be granted or varied in respect of this applicant concerning the supply of alcohol at lified above. I also confirm that I am applying
Personal Licence Number:	04649 PA394X
Expiry Date on Personal Licence:	11/07/2022
Name of Personal Licence issuing authority:	Bruckpool council
Address of issuing authority:	Cooperation street
Telephone of issuing authority:	01253 472477
Signed by proposed DPS:	I.Ensil
Print Name:	ISMail EZZAT
Date:	2/05/2011



Section 1 - Premises or Club details

Name & Address of		Central Biackpool		
Premises			Post Code	FYI 505
Name of the licer	nce holder of th	e above premis	es (if known)	
/	SMAIL	EZZAT		

Section 2 - Your Details

Details of individual interested party

Title:	Mr	Mrs	Miss	Ms	Surn	ame	Wic	ES			
Forenames	Nag	mi	Alex	andra			I am 1		ars old	Yes	ease tick
Home address		Bla	alipa	Ass							
						Pos	st Code	F	YI	6	A A
Telephone Number	OX	5982	494	43	Mobile Number		1598	14	943	43)

B. Details of other interested parties, such as a body representing residents or businesses

Name of the Body			
First Names (of person representing the body)		Irname on representing	
Home address			
		Post Code	
		2000 000 State 2010 0000	300000
Telephone Number	Mobile Number		

Section 3 – Details of the licensing objectives that will be undermined by the application.

This representation relates to the following licensing objective/s

The Prevention of Crime and Disorder
Public Safety
The Prevention of Public Nuisance
The Protection of Children from Harm

(Tick as appropriate)

Section 4 - Information and details of the representation

Have you made any representations in respect of this premises before?	S	No
Date that the previous representation was made:		
I understand that the Licensing Authority is obliged to give notice of a hearing to all parties to the hearing and this must include a copy of this representation.		Yes

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

Please state the grounds for your representation: - {Please continue on additional sheets if necessary}

As a resident and day to day user of central drive i hm aware of an new application for a new premises contence for the above property. On behalf of me and my local community, I would very much like to make a formall objection to this application.

In order to reduce Crunae and disorder in the local area of central dive.

- The Licencing Committee to Consider the amount of promises on centra drue already got alcohol linconsics to serve alcohol from early till late increases antisosial behaviour and highers crime rate.
- of the town certire selso serving alcohol both clay the and nightime also increase crime and disorder rate.

None of the information on this application form detains the above applicant intends to promote Any of the invencing objectives in particular the crune and disorder objective.

(CONT)

Please provide as much information as possible to support your representation. Note that if you have not disclosed this information, you may not be able to introduce it at the hearing unless all parties consent.

Section 5 Signatures

Signature of the person making the representation or their solicitor or other duly authorised agent. If signing on the behalf of a person or body representing a person living or carrying on business in the vicinity of the premises, please state in what capacity.

Signature:	Capacity:	Date:
And	CONCERNED RESIDE	NT 24/6/2014

have feet the need to write this objection due to the fact of the increased anti sosial behaviour and crime and disorder that has Steeply increased in this location over the past 18 months.

Speaking for my self as a single mother the regular Congrigation of people how Congregated next door to the Above premises harasing me and my family and Other people of the Community on a simple walk to town and back. In my oppinion the aboved Named Unicensis applicant is allready demonstrating allowing disnegative to pursue of the past 18 numbers.

Section 1 - Premises or Club details

Name & Address of	41-43	CENTRAL BLACKPOOL	DR	RIVE	
Premises			Post Code	FYI	595
Name of the lice	nce holder of the	above premises (if kno	own)		

Section 2 - Your Details

A. Details of individual interested party

Title:	Mr	Mrs	Miss	Ms	Surname	e MILLER	
							Please tick
Forenames	Jo	HN				I am 18 years old or over	Yes No
Home address	5)	CENS	TRAL 2	URUB LACKPOO		
	-			Di	ACKYOO	_	
					F	Post Code	1500
Telephone Number	079	550	668	93	Mobile Number	07 955 0 66 80	8
E-Mail Address	ada	licted	toke	oslery2	47 CGMa	il Com	

B. Details of other interested parties, such as a body representing residents or businesses

Name of the Body			
First Names {of person representing the body}		rname n representing	
Home address			
		Post Code	
Telephone Number	Mobile Number		
E-Mail Address			

Section 3 – Details of the licensing objectives that will be undermined by the application.

This representation relates to the following licensing objective/s

		(TICK as appropriate		
0	The Prevention of Crime and Disorder			
0	Public Safety			
0	The Prevention of Public Nuisance			
0	The Protection of Children from Harm			

Section 4 – Information and details of the representation

Have you made any representations in respect of this premises before?	No
Date that the previous representation was made:	
I understand that the Licensing Authority is obliged to give notice of a hearing to all parties to the hearing and this must include a copy of this representation.	Yes

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

Please state the grounds for your representation: - (Please continue on additional sheets if necessary) AS A CONCERNED RESIDENT OF CENTRAL DRIVE I AM AWARE OF AN APPLICATION FOR A NEW PREMISES LICENCE FOR THE ABOVE ADDRESS. ON BEHALF OF MY COMMUNITY, FIND HAVING REVIEWED BOTH THE APPLICATION, AND ALSO THE CURRANT OFF LICENCE SATURATION POLICY I WOULD VERY MUCH LIKE OFF LICENCE SATURATION POLICY I WOULD VERY MUCH LIKE TO MAKE A FORMAL OBJECTION ON THE FOLLOWING GROUND'S. I MAKE THIS OBJECTION ON THE EXISTING/LICENCE BEING WITHIN THE OFFLICENCE SATURATION POLICY AREA. THE PERPOSE OF THIS POLICY IS TO LIMIT THE NUMBER OF LICENCED PREMISES WITHIN A GIVEN GEOGRAPHIC ARDA, IN ORDER TO REDUCE CRIME AND DISORDER AND ACTIVLEY PROMOTE THE LICENCING OBJECTIVES THE POLICY SET'S OUT THE FOLLOWING THE NUMBER, TYPE AND DENSITY OF THE PREMISES, SELLING ALROHOL IN A PARTICULAR CAN LEAD TO SERIOUS PROBLEMS OF NUISANCE AND DISCRDER. IN THESE CIRCUMSTANCES THE IMPACT OF THE PREMISES / AS A WHULE CAN BE FAR GREATER THAN THAT ARISING FROM INDIVIDUAL PREMISES, IN MOST CASES IT WOULD BE IMPOSSIBLE TO IDENTIFY AN INDIVIDUAL PREMISE AS BEING THE SOLE CAUSE OF MAJOR CONTRIBUTING FACTOR .. · THE POTENTIAL IMPACT ON THE PROMOTION OF THE LICENCING CJECTIONS by A SIGNIFICANT NUMBER OF LICENED PREMISES CONCENTRATED IN ONE AREA IS CALLED COMPATTUE IMPACT! THE CUMULATIVE IMPACT OF ALL THE PREMISES IN AN AREA UPON THE PROMOTION OF THE LICENCING OBJECTIVES IS A PROPPER MATTER FOR THE LICENCING COMMITTEE TO CONSIDER. THIS APPLICATION IS WITHIN THE SATURATION BONE, THE LOCATION OF THE PROPOSED PREMISES IS ON THE OUTSMILTS OF THE TOWN, SERVICING BOTH THE DAYTIME & NIGHT TIME ECONOMY THESE PREMISES WILL ONLY ADD TO THE AVALABILITY OF ALCOHOL AND INCREASE CRIME & DISSUEDED. NO IMPORMATION HAS BEEN PROVIDED ON THE APPLICATION FORM DETAILING HOW THE APPLICANT INTENDS TO PROMOTE ANY OF THE FOUR LICENCING OBJECTIVES, IN PARTICULAR THE CRIME AND DISSOLDER OBJECTIVE.

Please provide as much information as possible to support your representation. Note that if you have not disclosed this information, you may not be able to introduce it at the hearing unless all parties consent.

Section 5 Signatures

Signature of the person making the representation or their solicitor or other duly authorised agent. If signing on the behalf of a person or body representing a person living or carrying on business in the vicinity of the premises, please state in what capacity.

Signature:	Capacity:	Date:	
c. J. Melly.	CONLERNED RESIDENT	24/6/20	

