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For Office use only						
LalPac Application No.						
Licence Number						

# **Blackpool**Council

# Representation in respect of a Premises Licence or Club Premises Certificate

Applicant Name: JOHN JOB



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

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

www.blackpool.gov.uk

# How to make representations

# What are the Rights of an Interested Party?

An Interested Party can make representations in relation to an application, which by law must be forwarded to the applicant to enable a dialogue to take place between the various parties to allow an amicable resolution to the issues raised. If they cannot reach agreement then the Interested Party can present their objection at a hearing of the Licensing Committee. Representations must not be frivolous, repetitive or vexatious. Interested Parties must ensure that their objections are factually correct and substantial.

## What can my representation relate to?

The representations must relate to 'The Licensing Objectives', which are:

- The Protection of Children.
- The Prevention of Nuisance.
- The Protection of Public Safety and
- The Prevention of Crime & Disorder.

Any objection, which does not relate to one or more of the licensing objectives will not be considered. Similarly planning matters will not be reconsidered and the licensing hearings will not be a rerun of contested planning decisions.

### How do I make a representation?

It must be made in writing to the licensing service. A form is attached for this purpose. You must state the grounds upon which you are making representations. You should note that at the hearing you can only rely on the grounds stated within your notice.

#### Can I be represented?

You may put forward your representation yourself, or you may ask a solicitor or friend to assist you. If you appear or are represented your objection may be subject to cross-examination by the applicant or the applicant's representative or by members of the committee.

### What happens next?

The committee can approve the application or decide to uphold your objection and refuse the application or they can apply whatever conditions they believe to be adequate to ensure that the premises will not breach the licensing objectives.

#### Where can I get more information about the Licensing Act 2003?

Information can be obtained from Blackpool Council's Licensing Service or from the Home Office at www.homeoffice.gov.uk

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

Phone: 01253 478572 Fax: 01253 478372

Email: licensing.la2003@blackpool.gov.uk

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

This representation relates to the following licensing objective/s

	forman and and	h h
The Prevention of Crime and Disorder	$\checkmark$	]
Public Safety		
The Prevention of Public Nuisance	$ \overline{} $	
The Protection of Children from Harm		]
Section 4 – Information and details of the representation	Yes	No ,
Have you made any representations in respect of this premises before?		
Date that the previous representation was made:		
I understand that the Licensing Authority is obliged to give notice of a heali parties to the hearing and this must include a copy of this representati	earing to tion.	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

# Section 1 – Premises or Club details

Name &	7	HE (	AFE	GUES	ST HOUS	E				
Address	3	3 W	ELLI	VETON	ROAD					
Premises	E	RACK	Pec	4		Pos	t Code	Y /	6	AR
Name of the lic	ence i	holder	of the a	bove pre	mises (if kno	wn)		20 10 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1971, 317	
				· •						
Section 2 - Y	our [	<u>Details</u>				-				
A. Details	of in	dividua	al inter	ested pa	arty					
Title:	Mr	Miss	Miss	<b>M</b> **	Surna	me	JOB	-		
Forenames	J	OHN	/				l am 18 ye or over	ars old	Yes	se tick No
Home address	/\/			HOTEL						
	10	D Wi	ELLI,	NGTOK	y ROAL	フ				
	13	LACI	Pa	عد		Pos	st Code	71	6	A R
Telephone Number	012	253	344	597	Mobile Number					
E-Mail Address	12	JFO (	D R	tOSLYX	1-HOTE	2,	Corl	K		
		her int	ereste	d parties	, such as a	bod	y represe	nting re	sident	s or
busine	sses				. 123					
Name of the B	ody				<u> </u>					
First Names (of person representing the body)					Su (of perso the body					
To want		·								
Home address										
						Pos	st Code			
Telephone Number					Mobile Number					
E-Mail Address										

Please state the grou	nds for your representation:	- {Please continue on additional sheets if necessary}
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ROUDINESS IN THE EARLY HOURS WHILE MY CUSTOMERS ARE TRYING TO SLEEP.

CHANGE OF USE TO A CASE OPEN TO THE PUBLIC UNTIL SAM.

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:
Joh.	OWNER	4-7-18