

05 JUL 2018

For Office Use only	
LalPac Application No.	
Licence Number	

# Blackpool Council

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

<b>Applicant Name:</b>	CHRISTINE WALKER SANDGATE HOTEL
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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](http://www.blackpool.gov.uk)

LS/D/009/15/5

## 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](http://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](mailto: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**

(Tick as appropriate)

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

**Section 4 – Information and details of the representation**

<b>Have you made any representations in respect of this premises before?</b>	<b>Yes</b>	<b>No</b> <input checked="" type="checkbox"/>
<b>Date that the previous representation was made:</b>	N/A	
<b>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.</b>	<b>Yes</b>	<input checked="" type="checkbox"/>

**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 & Address of Premises	ERIKA HENYSOVA NEMHECKA					
	THE CAFE GUEST HOUSE 33 WELLINGTON					
	Rd Blackpool				Post Code	F 4 1     6 A R
Name of the licence holder of the above premises (if known)						

**Section 2 – Your Details**

**A. Details of individual interested party**

Title:	Mr	Mrs	Miss	<input checked="" type="radio"/> Ms	Surname	WALKER	
Forenames	CHRISTINE DIANE				I am 18 years old or over	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Home address	SANDGATE HOTEL						
	13 WELLINGTON ROAD						
	BLACKPOOL				Post Code	F 4 1     6 A R	
Telephone Number	01253 407137			Mobile Number	07515162291		
E-Mail Address	chrissielestia.sandgate1012@gmail.com						

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

Name of the Body							
First Names <small>(of person representing the body)</small>					Surname <small>(of person representing the body)</small>		
Home address							
					Post Code		
Telephone Number				Mobile Number			
E-Mail Address							

Please state the grounds for your representation: - (Please continue on additional sheets if necessary)

As Wellington Road is predominantly for holiday makers with children I feel this would be or could be a danger as children play along the pavement and alcohol infused Adults is not the way to protect them at all I have just sat on a course for the protection of children I find this application horrific

This opening till SAM would encourage people with alcohol problems which this part of Blackpool is well known for and again there is a lot of childrens residences at that half of the road which could then encourage crime in this area of which gives us a bad name in return loses us Roberts's customers which then leads to more Roberts being repossessed through no fault of our own and those people would be a public nuisance to all ranging around on the pavement.

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:
G Wawter	OWNER	2/7/18.