

For Office use only	
LalPac Application No.	
Licence Number	

05 NOV 2018
05 NOV

Blackpool Council

Representation in respect of a Premises Licence or Club Premises Certificate

Applicant Name:	FRANCIS THOMAS KELLY
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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

LS/D/009/15/5

Section 1 – Premises or Club details

Name & Address of Premises	MA KELLY'S / NUMBER THREE									
	DEVONSHIRE ROAD									
	BLACKPOOL	Post Code	F	Y	3			9	B	W

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	Ms	Mr	Surname	BLACKBURN			
Forenames	SIMON					I am 18 years old or over	Please tick Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
Home address	c/o Dickson's Hall, Talbot Rd Blackpool									
						Post Code	F	Y	1	I N A
Telephone Number	01253 477477					Mobile Number				
E-Mail Address	simon.blackburn@blackpool.gov.uk									

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											

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

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

Section 4 – Information and details of the representation

Have you made any representations in respect of this premises before?	Yes	No <input checked="" type="checkbox"/>
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 <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

This public house is in a quiet residential area, near to a primary school and a playground as well as being close to people's homes.


The current licensing hours are perfectly adequate - noise continuing (or live music) after midnight would be highly detrimental to my constituents quality of life.

Additional risk of ASB, crime & drink behaviour will be detrimental to all apart from the licensee.

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:
	Local Councillor	02/11/18