

Received

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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:	NUMBER 3 / MA KELLY'S
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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	No 3 / MA KELLY'S									
	DEVONSHIRE SQUARE, WHITEGATE DR									
	BLACKPOOL	Post Code								

Name of the licence holder of the above premises (if known)

Section 2 – Your Details

A. Details of individual interested party

Title:	<input checked="" type="radio"/> Mr	<input type="radio"/> Mrs	<input type="radio"/> Miss	<input type="radio"/> Ms		Surname	BLACKER MBE						
Forenames	DAVID HUGH WILLIAM					I am 18 years old or over	Please tick Yes <input type="checkbox"/> No <input type="checkbox"/>						
Home address	32 MARLBOROUGH RD												
	BLACKPOOL												
						Post Code	F	Y	3		9	D	X
Telephone Number						Mobile Number							
E-Mail Address													

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

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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"/>
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Date that the previous representation was made:	
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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"/>
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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)

I have real concerns that this is a residential area, close to housing and that a late night license will threaten the peace and quiet of the area.

We all know the problems that our town has around drunk and disorderly patrons of late night drinking establishments.


In line with the nearby Belle Vue a more resident friendly closing time would be more appropriate in my view.

I feel that the same rationale could be applied to the late night live music.

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:
	PERSONAL	09/11/18