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LaiPac Application No.

Licence Number

7 A WAY 5018

Blackpool Council

Representation in respect of a Premises Licence or Club Premises Certificate

Applicant Name:

PAUL OGDEN

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

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www.blackpool.gov.uk

LS/D/009/15/5

Section 1 - Premises or Club details

| Name & Address of | WHITE | GATE DR | ELLY'S | _ | Fu | 8 | | | |
|-------------------------|--------------------|-------------------|-----------|---|----|---|----|---|---|
| Premises | BLACK | Pool- | Post Code | F | Y | 3 | 19 | 8 | W |
| Name of the licen | ce holder of the a | hove premises (if | known | | | | | - | |

Section 2 - Your Details

A. Details of individual interested party

| Title: | Mr | Mrs | Miss | Ms | Surnan | Ne 00 | DEN | | |
|---------------------|----|-------|------|--------------|------------------|-------------------|-----------|-------|---------|
| | | | | - | | | - | Pleas | se tick |
| Forenames | P | AUL | | DAV | 0 | I am 18 or ove | years old | Yes | No |
| Home address | -7 | 12 | | WCAS Kloc | | AVE | | | |
| | | 14.00 | | | | Post Code | FY3 | 9 | DH |
| 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 | | n representing | |
| Home address | | | |
| No. of the second | | Post Code | |
| Telephone Number | Mobile Number | | |
| E-Mail Address | 10.000 | | |

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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 | |
| | Public Safety The Prevention of Public Nulsance |

Section 4 - Information and details of the representation

| Have you made any representations in respect of this premises before? | Yes | No |
|---|-----|-----|
| Date that the previous representation was made: | | |
| I understand that the Licensing Authority is obliged to give notice of a hear 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)

I wish to object to the NO3 Premises having a licence until 2am. IT would mean that around the area which is predominately residential, would be a problem of a mustance to residents around noise and disturbance.

The Police would be over strecked even more at the late hour. Also the noise of taxis doors and the possibilty of Poorle arguing over taxis add to the disturbance

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: |
|------------|-----------|---------|
| | | 5-11-18 |

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