Appendix 4(d)

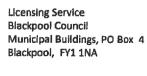
Blackpool Council

Representation in respect of a Premises Licence or Club Premises Certificate

Applicant Name:

MELANIE

TALBOT



Contact

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

www.blackpool.gov.uk

Section 1 - Premises or Club details

Name & Address of	MELANIE TALBOT, NEW ROAD INN 244 TALBOT ROAD									
Premises	BLACKPOOL		Post Code	F	Y	1		3	H	

Section 2 - Your Details

A. Details of individual interested party

Title:	Mr-	Mrs	Miss	Ms	Surna	me	SE) [TI	(K	_	
											Pleas	se tick
Forenames	D	ORO	TA				or ove		ars (old	Yes	No
Home address	-			STOM		AI	>					
	4	ANC	ASI	TIRE								
	B	LAC	RPE	DOL		Pos	st Code	F	Y	1	3	HN
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 (of person representing the body)		rname representing	
Home address			
		Post Code	
Telephone Number	Mobile Number		

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 ap	propriate)
The Prevention of Crime and Disorder		
Public Safety		
• The Prevention of Public Nuisance	V	<u> </u>
The Protection of Children from Harm]
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		

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)

1. <u>Nuisance</u>: karaoke nights, load music, live music, drunk customers having load conversations and arguments, customers behaving very loud in inappropriate manner, emptying bins with glass bottles. Behaviour of the customers and load music couse interrupted sleep for my family.

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:
	The person making Representation	4.4.2019