

14 JUN 2016

LICENSING ST



LICENSING AUTHORITY

Environment Services, Chesterfield Borough Council, Customer Service Centre, 85
New Square, Chesterfield Persuant Council, Customer Service Centre, 85
New Square, Chesterfield Persuant Council, Customer Service Centre, 85

Representation Form

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block can be a legible. In all cases ensure your answers are inside the boxes and written in black inc. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

I/We wish to make a representation in relation to an application that has been made in respect of the premises described in Part 1 below

Part 1 - Premises or club pr

The state of the s

Postal address of premises or club premises, or if none, ordnance survey map reference or description

ISRAMPTON ROULES IN STENDEN BACKLANE CHESTERFIELD S40 4RW

Post town CHESTER FIELD

Post code (if known) 54048W

Name of Premises Licence holder or Club holding Club Premises Certificate (if known) BRAMPTON ROVERS HOLDINGS LTD

Number of Premises Licence or Club Premises Certificate (if known)

Part 2 - Representor details

(A) DETAILS OF INDIVIDUAL REPRESENTOR (fill in as applicable)					
Mr MR Mrs	Miss	Ms Rev)	Other title (for example,		
Surname First names					
			Please tick ✓ yes		
I am over 18 years old or over					
Current postal address if different from premises address	GRASSCA	POFT CLOSE			
Post town	CHESTERFIELD	Postcode	S40 4HL		
Daytime contact telephone number					
Email address (optional)					
(B) DETAILS OF OTHER REPRESENTOR (Business, Residents Association etc)					
Name and address					
Telephone number (if any)					
E-mail address (optional)					

This Representation relates to the following licensing objective(s)

	Please tick one or more i	boxes √			
1)	the prevention of crime and disorder				
2)	public safety				
3)	the prevention of public nuisance				
4)	the protection of children from harm				
Plea	Please state the ground(s) for making the Representation (please read guidance note 1)				
The	Prevention of Crime and Disorder				
Pub	blic Safety				
	,				
The	e Prevention of Public Nuisance				
	CURRENTLY WE HEAR NOISE FROM THE FOOTBALL ITCHES OVER THE WEEKEND. TO HAVE NOISE				
l l	TO THE EMPLI FLORICO I				
Co	F THE MORNING IS NOT SOMETHING I FIND AT ALL				
1 ~	ACCEP!				
K	LICENSING TO BAM EVERY NIGHT OF THE WEEK EFFECTIVE				
2)	LICENSING TO 3AM EVERY NIGHT OF THE WEEK ZPPEOND ELY CHANGES A CLUBHOUSE INTO A NIGHTCLUB. THIS IS ELY RESIDENTIAL AREA.				
7	he Protection of Children from Harm				
1 8 17	ne Protection of Official in the same				

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.

Part 3 - Signatures (please read guidance note 2)

Signature of Representor or Representor's Solicitor or other duly authorised agent (please read guidance note 3). If signing on behalf of the Representor please state in what capacity.

Signature				
Date 14.6.16.				
Capacity				
Please Note – Your address will be a matter of public record, if the application to which this Representation relates is referred to the Licensing Committee to determine at a Hearing. Contact name (where not previously given) and postal address for correspondence associated with this Representation (please read guidance note 4)				
·				
Post town	Post code			
Telephone number (if any)				
If you would prefer us to correspond wi	ith you by e-mail your e-mail address			

Notes for Guidance

- The Representation must be based on one or more of the licensing objectives. Please list any additional information or details for example dates of problems if available.
- 2. The Representation form must be signed.
- 3. A Representor's agent (for example Solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 4. This is the address and contact details which we shall use to correspond with you about this Representation.