



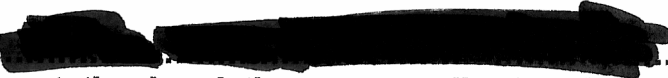
LICENSING AUTHORITY

Environment Services, Chesterfield Borough Council, Customer Service Centre, 85
New Square, Chesterfield, S40 1AH Tel: 01246 345230

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 capitals. In all cases ensure your answers are inside the boxes and written in black ink. 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 premises details

Postal address of premises or club premises, or if none, ordnance survey map reference or description	
BRAMPTON ROVERS AFC NEUBOLD BACK LANE	
Post town	Post code (if known)
CHESTERFIELD	S40 4RW

Name of Premises Licence holder or Club holding Club Premises Certificate (if known)

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

RECEIVED
17 OCT 2016
LICENSING

(A) DETAILS OF INDIVIDUAL REPRESENTOR (fill in as applicable)

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

Post town Postcode

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)

Please tick one or more boxes ✓

- 1) the prevention of crime and disorder
- 2) public safety
- 3) the prevention of public nuisance
- 4) the protection of children from harm

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

Please state the ground(s) for making the Representation (please read guidance note 1)

<p>The Prevention of Crime and Disorder</p> <p>ACCESS TO THE PREMISES, ie, PUBLIC FOOTPATH AND UNLIT AND UNADOPTED ROAD (PERFECT COVER FOR ANTI SOCIAL BEHAVIOUR) ALSO CLOSE PROXIMITY TO TWO EXISTING LICENCED PREMISES AND RESIDENTIAL PROPERTIES.</p>
<p>Public Safety</p> <p>ONLY ACCESS TO THE BUILDING VIA UNADOPTED UNLIT ROAD.</p>
<p>The Prevention of Public Nuisance</p> <p>LOUD MUSIC AND THE SALE OF ALCOHOL (FOR PROFIT) ON WHAT WAS GRANTED PERMISSION FOR NON PROFIT MAKING FOOTBALL MATCHES ONLY.</p>
<p>The Protection of Children from Harm</p> <p>AS ALREADY STATED THE SELLING OF ALCOHOL ON "PLAYING FIELDS" WHICH ARE SUPPOSEDLY FOR THE USE OF CHILDREN.</p>

Outline Planning Permission For 44 Cars is obviously not adequate. This is obvious by the fact when football matches are in progress, Oaks Park in Hastings close, as Newbold Back Lane and the grassed areas are full to capacity.

We know from experience that response times from the police are at best inadequate, and surely another licensed premises will only add to their problems.

We are also concerned about the level of noise. We do hear the noise of the football matches on SATS/SUNS, which we do not mind. But this proves that the noise does carry, but the noise from licensed premises, and loud music at night would travel even more.

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

Signature [Redacted Signature]

Date [Redacted Date]

Capacity [Redacted 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)	
[Redacted Contact Name and Address]	
Post town [Redacted]	Post code [Redacted]
Telephone number (if any) [Redacted]	
If you would prefer us to correspond with you by e-mail your e-mail address (optional)	

Notes for Guidance

1. 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 Representer’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.