

**Licensing Act 2003
Representation in respect of a
Premises Licence Application or Variation or a
Club Premises Certificate Application or Variation**

Please read the following instructions first

Representations **must** be made to the Licensing Authority in writing. They cannot be lodged electronically (i.e. by email or by fax) unless this method is agreed beforehand with the Licensing Authority (the Council) and, if it is agreed they may be sent electronically, a written copy must be sent to the Licensing Authority forthwith. Failure to observe the requirements may invalidate it.

You are not obliged to use this form to make a representation and you may make a representation by letter if you wish. This form will guide you through the process though. If you are completing this form by hand, please print. Please ensure your answers are inside the boxes and written in black ink as we will need to photocopy the form. You may use additional sheets if necessary. You may wish to keep a copy of the completed form for use by you at any hearing held by the Council or the Magistrates Court as a result of this representation.

I, the undersigned, hereby make representations against the following application.

Details of premises or club premises whose application you wish to make representations against.

Name of Premises or Club MR KOKULATHAS MUTHULINGHAM
Address of Premises or Club 23 CHARWOOD AVENUE WESTONE NORTHAMPTON
Post code (if known) NN3 3DX

Type of Application

Please tick ✓

Premises Licence application	✓
Variation to a Premises Licence	
Club Premises Certificate application	
Variation of a Club Premises Certificate	

Representor's Details

I am

Please tick one only ✓

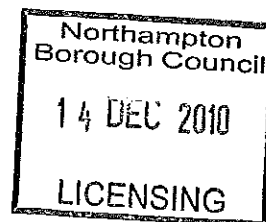
- 1) An interested party
 - a) A person living in the vicinity of the premises (please complete section A below)
 - b) A body representing persons living in the vicinity of the premises (please complete section B below)
 - c) A person involved in business in the vicinity of the premises (please complete section A below)
 - d) A body representing persons involved in business in the vicinity of the premises (please complete section B below)
 - e) A Member of a relevant Licensing Authority (please complete section D below)
- 2) A responsible authority (please complete section (C) below)

✓

If you do not fall into one of the above categories you may not be entitled to make representations.

Section A - Details of Individual Representor (fill in as applicable)

Title MR + MRS	Surname or Family Name GIBSON.
Forenames MR JOHN + MRS ROSALIND	
Address of where you live (you can give an alternative address for correspondence later in this form) 52 CHARNWOOD AVENUE WESTON NORTHAMPTON	
Post code	NN3 3DU
Daytime Telephone	01604 408893
E-mail address (optional)	



Section B - Details of Bodies Making Representations

Name of person completing this form
Name of Body
Address of Body
Post code
Daytime Telephone number of person completing this form
E-mail address of person completing this form (optional)

Section C - Details of Responsible Authority

Name of contact person completing this form
Name of Authority
Address of Authority
Post code
Telephone number of contact person
E-mail address of contact person (optional)

Section D - Details of a Member of a relevant Licensing Authority

Name of contact person completing this form
Name of Licensing Authority
Address of Licensing Authority
Post code
Telephone number of contact person
E-mail address of contact person (optional)

This representation relates to the following licensing objectives(s)

(Ticking one of these boxes alone does not constitute a valid representation. The grounds of objection must be described overleaf but must relate to one of these objectives.)

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

If your representation does not relate to one of the above objectives your representation will be invalid.

Please state the ground(s) for the representation and how it relates to one of the licensing objectives. You should also state what action you would like to see taken by a licensing sub-committee should a public hearing become necessary.

If the grounds of the representation are not set out below or on an accompanying sheet this representation will be invalid.

Please use additional blank sheets if necessary

A licence to sell alcohol in a shop in this vicinity is not appropriate or needed as there is a 24-hour Tesco within 5 minutes walking distance. The proposed opening hours are far too long and late and will attract unsocial behaviour, as borne out with similar premises in Basethville and Parklands. The PCSO's can confirm the excessive criminal damage and anti-social behaviour that is alcohol-related and mostly "yobish" behaviour from congregating around shops. They have worked hard with us residents to date and a new source is frightening. The security at Superstores, including personnel as well as detectors, CCTV etc is far more effective at controlling under-age potential law-breakers, which no small shopkeeper can deal with. We have already experienced criminal damage to our property which crosses the walkway from Chorwood Ave to Lambert's way, and a shop of this nature will increase the footfall at early morning and later evening, particularly school children. The Co-op Supermarket in Busland Road employs Security to assist with this problem. Westone Estate is served well with bus transport and a local off-licence is not needed.

Please tick ✓

- I understand that this representation may result in a hearing before a Licensing Sub-Committee and if the decision of that Sub-Committee is appealed against, a hearing in the Magistrate's Court.
- I understand that this representation may become a public document, that a full copy will be sent to the applicant and that it will be scrutinised by members of the Licensing Sub-Committee hearing that may be held as a result of this representation.

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

It is an offence, under section 158 of the licensing act 2003, to knowingly or recklessly make a false statement in connection with this representation. This is punishable, on conviction, by a fine of up to £5,000.

This representation must be signed by:

- an individual making a representation or
- a person authorised to do so by a body representing persons living in the vicinity of the premises
- or a body representing persons involved in business in the vicinity of the premises, or
- a person authorised to do so by a Responsible Authority.

Signed *J. Gibson* *R. Gibson* Date ..11.. December 2010 ..

Address for correspondence

Contact address for correspondence if different from that given in Sections A, B, or C above. <i>JOHN GIBSON & ROSALIND GIBSON</i>	
Post town	Post code
Daytime Telephone number (if any)	
e-mail address (optional)	