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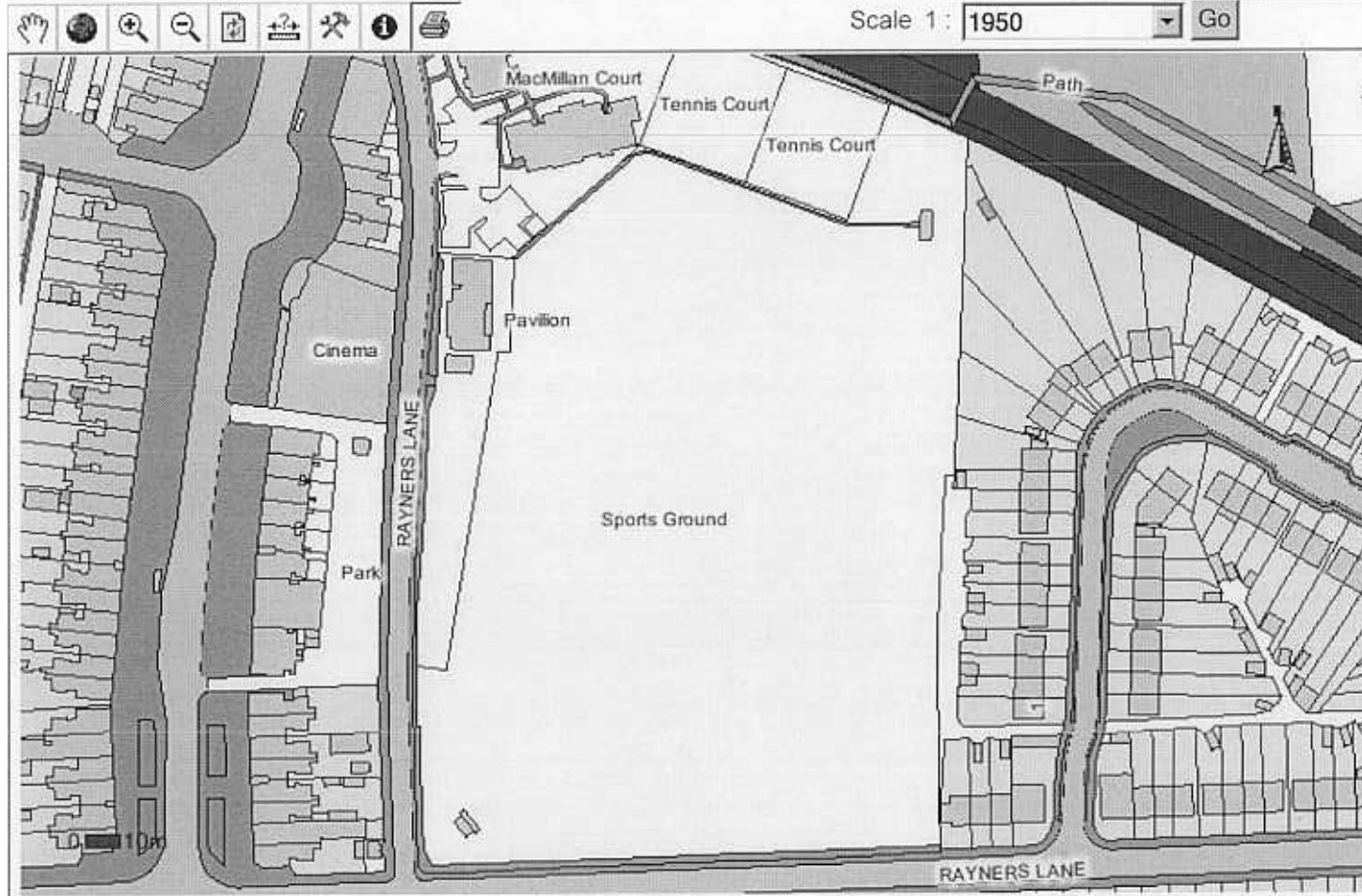


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Harrow Council, Licensing Section, P O Box 18, Station Road, Harrow.

Making a Representation against an Application (New or variation) for a premises licence or club premises certificate under the Licensing Act 2003

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 that 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, Police Sergeant Carl Davis, make this representation under

the Licensing Act 2003 for the premises described in Part 1 below (delete as applicable)

Part 1 – Premises or club premises details

Postal address of premises or club premises, or if none, ordnance survey map reference or description	
Harrow Town Sports Club , Rayners Lane , Harrow	
Post town Harrow	Post code HA2 9TY

Name of premises licence holder or club holding club premises certificate (if known)
Number of premises licence or club premises certificate (if known)

Part 2 - Applicant details

I am	Please tick ✓ yes
1) an interested party (please complete (A) or (B) below)	<input type="checkbox"/>
a) a person living in the vicinity of the premises	<input type="checkbox"/>
b) a body representing persons living in the vicinity of the premises	<input type="checkbox"/>
c) a person involved in business in the vicinity of the premises	<input type="checkbox"/>
d) a body representing persons involved in business in the vicinity of the premises	<input type="checkbox"/>

2) a responsible authority (please complete (C) below)

3) a member of the club to which this application relates (please complete (A) below)

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

Mr Mrs Miss Ms Other title
(for example, Rev)

Surname

First names

I am 18 years old or over

Please tick yes

Current address

Post Town

Post Code

Daytime contact telephone number
Email address
(optional)

(B) DETAILS OF OTHER APPLICANT

Name and address	
<input type="text"/>	
Telephone number (if any)	
<input type="text"/>	
E-mail (optional)	
<input type="text"/>	

2

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address	
Metropolitan Police South Harrow Police Station 74 Northolt Road South Harrow HA2 0DN	
Telephone number (if any)	0208 733 3415
E-mail (optional)	

This representation relates to the following licensing objective(s)

Please tick one or more boxes

- | | |
|---|-------------------------------------|
| 1) the prevention of crime and disorder | <input checked="" type="checkbox"/> |
| 2) public safety | <input checked="" type="checkbox"/> |
| 3) the prevention of public nuisance | <input checked="" type="checkbox"/> |
| 4) the protection of children from harm | <input checked="" type="checkbox"/> |

Please state the ground(s) for review (please read guidance note1)

Police are not satisfied that the applicant has suggested any additional measures to promote the four licensing objectives, especially the prevention of crime and disorder, they have merely extended the hours in which alcohol can be purchased and consumed.

The minimum requirements that police would expect should varied hours be granted are no drinks promotions and correctly installed and functioning CCTV both within and immediately outside the premises. I request that the applicant contact the police Crime Reduction officers and that such an officer be allowed full access to all areas of the premises in order to review all security measures and that the applicant agree to any recommendations forthcoming in his report. This is to prevent crime and disorder.

The premises would need to investigate the possibilities of participating in a pub watch type scheme for the area with necessary communication links to police and other premises within this area.

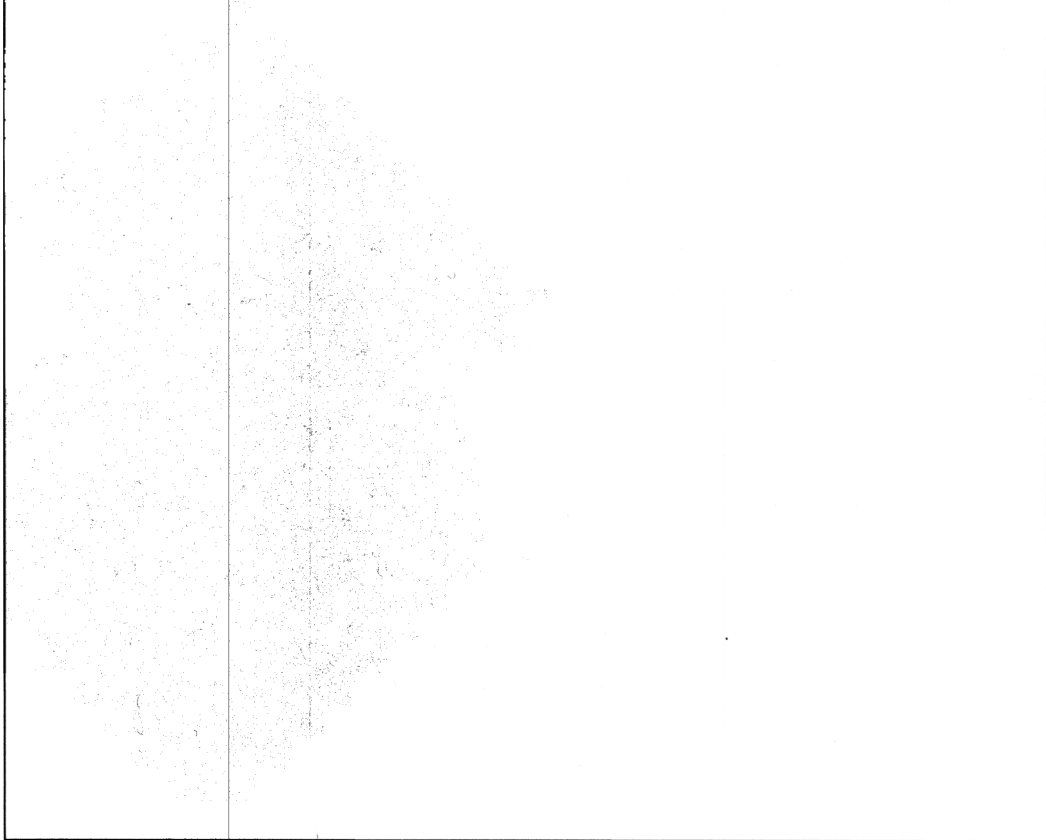
Further details should be given by the applicant as to how they will conduct the premises and protect children visiting the premises from harm.

A limit should also be set as to the maximum number of persons allowed in the premises at any one time to prevent overcrowding and potential tensions would follow.

We request that the applicant fix a last sale time condition on the licence or adjust the permitted sale time accordingly. This is to prevent offences likely to occur by sale to staff just prior to the terminal hour and consumption beyond this hour – outside of licensed hours.

The fact that there seem to have been few problems to date with the club does not mean that there will be none when the opening times are extended and in my experience extended hours

will produce potential for more trouble in and around the premises taking into account the factors mentioned above.



Please provide as much information as possible to support the application (please read guidance note 2)

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Please tick
yes

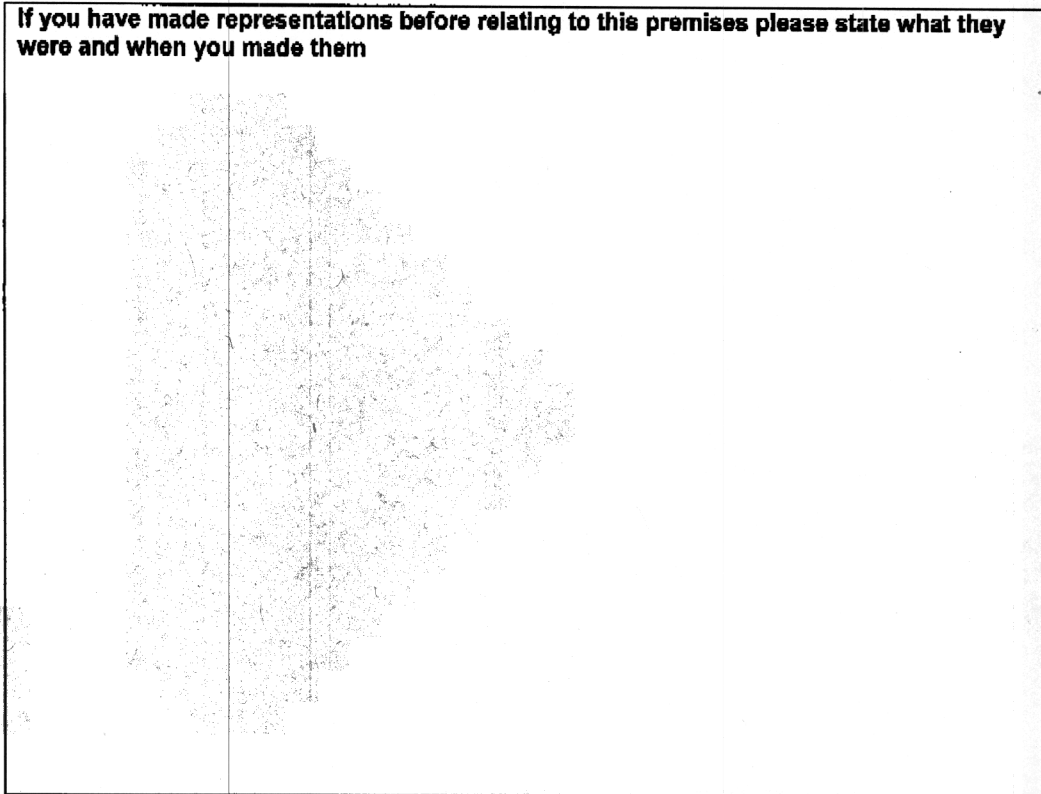
Have you made a representation relating to this premises before

NO

If yes please state the date of that representation, Day Month Year

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If you have made representations before relating to this premises please state what they were and when you made them

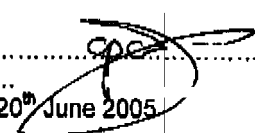


IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE [AMOUNT], UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 5 – Signatures (please read guidance note 3)

Signature of applicant or applicant's solicitor or other duly authorised agent. (please read guidance note 4)
If signing on behalf of the applicant please state in what capacity.

Signature



Date 20th June 2005

Capacity Police Licensing Officer

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 5)	
Post town	Post code
Telephone number (if any)	
If you would prefer us to correspond with you using an email address your e mail address (optional)	

Notes for Guidance

1. The ground(s) for representation must be based on one of the licensing objectives.
2. Please list any additional information or details for example dates of problems, which are included in the grounds for representation if available.
3. The application form must be signed.
4. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
5. This is the address, which we shall use to correspond with you about this representation.

Relevant Representations means;

- a) are about the likely effect of the grant of the premises licence or club premises certificate on the promotion of the licensing objectives,
- b) that the representation were made by an interested party or responsible authority within the period prescribed, 28 days from the application was advertised.
- c) in the case of representations made by an interested party (who is not also a responsible authority) that they are not, in the opinion of the relevant Licensing Authority, frivolous or vexatious.

Further restrictions apply relating to Police Representations on DPS's and representations on provisional statements. Please check with the Licensing Section.

Harrow Council, Licensing Section, P O Box 18, Station Road, Harrow.

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You may wish to keep a copy of the completed form for your records.

I **Louise Roberts** make this representation under the Licensing Act 2003 for the premises described in Part below (delete as applicable)

Part 1 – Premises or club premises details

Postal address of premises or club premises, or if none, ordnance survey map reference or description	
Harrow Town Sports Club, Rayners Lane.	
Post town Harrow	Post code (if known) HA2 9TY

Name of premises licence holder or club holding club premises certificate (if known) Harrow Town Sports Club
Number of premises licence or club premises certificate (if known)

Part 2 - Applicant details

I am

1) an interested party (please complete (A) or (B) below)

Please tick byes

a) a person living in the vicinity of the premises

b) a body representing persons living in the vicinity of the premises

c) a person involved in business in the vicinity of the premises

d) a body representing persons involved in business in the vicinity of the premises



- 2) a responsible authority (please complete (C) below)
- 3) a member of the club to which this application relates (please complete (A) below)

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

Mr Mrs Miss Ms Other title
 (for example, Rev)

Surname

First names

am 18 years old or over

Please tick byes

Current address

Post Town

Post Code

Daytime contact telephone number

Email address
 (optional)

(B) DETAILS OF OTHER APPLICANT

Name and address	
Telephone number (if any)	
E-mail (optional)	

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address London Borough of Harrow, Community Safety Services Department, Environmental Protection Team PO Box 18 Civic Centre Harrow Middlesex HA1 2UT
Telephone number (if any) 020 8424 1891
E-mail (optional) louise.roberts@harrow.gov.uk

This representation relates to the following licensing objective(s)

Please tick one or more boxes

- | | |
|---|-------------------------------------|
| 1) the prevention of crime and disorder | <input type="checkbox"/> |
| 2) public safety | <input type="checkbox"/> |
| 3) the prevention of public nuisance | <input checked="" type="checkbox"/> |
| 4) the protection of children from harm | <input type="checkbox"/> |

Please state the ground(s) for review (please read guidance note1)

Within the application there are no steps detailed pertaining to the prevention of public nuisance from the premises, in particular with regard to noise nuisance.

A time for which the premises will close has not been stated clearly within the operating schedule of the application, only the time the sale of alcohol and the playing of recorded music will finish. Therefore the impact on the Local residents cannot be fully assessed.

Please provide as much information as possible to support the application (please read guidance note 2)

Concerns relate to the effect on the neighbouring residential population of the times in which club members leave the premises, and the precautions the club intend to take to prevent nuisance from cars' people talking and music from cars. While the sale of alcohol will cease at 24:00 numbers of people could still be on the premises for some hours with the potential to cause problems with noise nuisance.

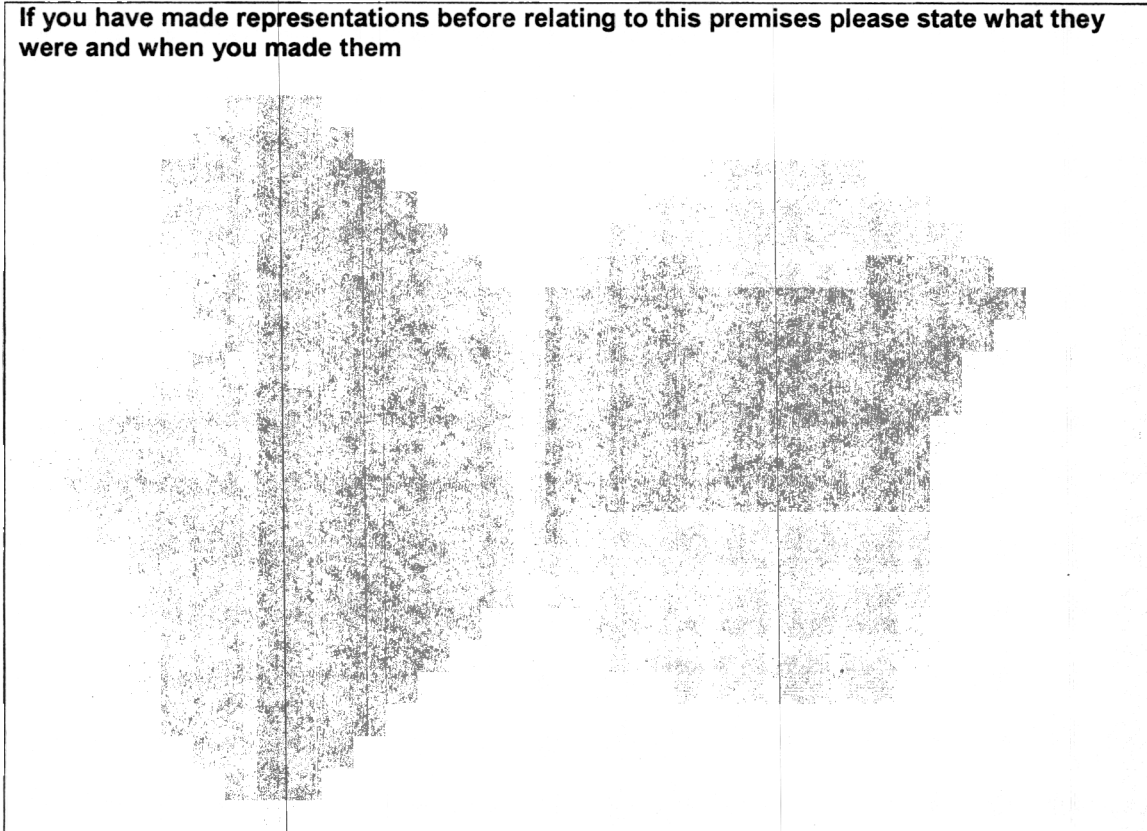
Please tick
yes

Have you made a representation relating to this premises before

If yes please state the date of that representation, Day Month Year

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If you have made representations before relating to this premises please state what they were and when you made them



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Part 5 – Signatures (please read guidance note 3)

Signature of applicant or applicant's solicitor or other duly authorised agent. (please read guidance note 4)
If signing on behalf of the applicant please state in what capacity.

Signature 

Date: June 22nd 2005

Capacity **Environmental Health Officer**

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 5)	
See Part C	
Post town	Post code
Telephone number (if any)	
If you would prefer us to correspond with you using an email address your e mail address (optional)	

Notes for Guidance

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3. The application form must be signed.
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