

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, John Bridgewater JOHN BRIDGEWATER
(Insert name of applicant) 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 | |
| Pinner HM Golf Club SOSM View Rd Pinner | |
| Post town | Post code (if known) |

| |
|--|
| Name of premises licence holder or club holding club premises certificate (if known) |
| Pinner Hill Golf 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)

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

Please tick ✓ yes

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LICENSING OFFICE

27 JAN 2012

TIME

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 *Dr*
(for example, Rev)

Surname *BRIDGEMAN*

First names *JON*

Please tick yes

I am 18 years old or over

Current 

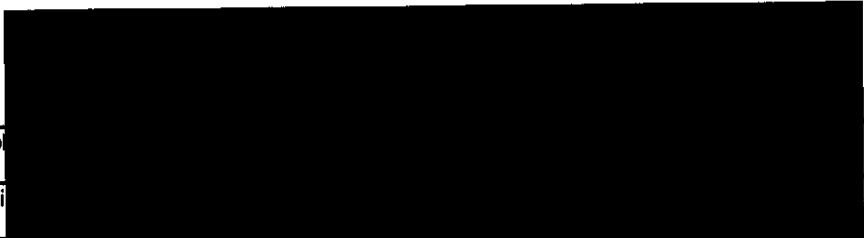
Post 

Daytime 

Email 

(optional)

(B) DETAILS OF OTHER APPLICANT

| | |
|--|--|
| Name and address | |
| <i>GOODCHILD Kate Dr</i> | |
|  | |
| Telephone | |
| E-mail | |

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

| |
|---------------------------|
| Name and address |
| |
| Telephone number (if any) |
| 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
- 2) public safety
- 3) the prevention of public nuisance
- 4) the protection of children from harm

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

Pinner Hill is a quiet suburban estate and we live on Park View Rd, the primary approach for the Golf Club. We are doctors and have worked in the NHS for over 20 years. We have 2 children who attend a local school. As such the Pinner Hill Estate and our road presents

an excellent, quiet environment in which to bring up our young children.
 (P.T.O.)

(cont.)

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

When there is a local event likely to lead to noise late at night or more traffic, residents on the estate are in general very considerate and let us have good warnings.

This permission would lead to more regular antisocial events in a residential area and as such not only significantly affect the quality of our lives, but also the value of our property.

I am sure that the Council are sensitive to the particular special features of this area that make living here so attractive.

I would be willing to make other representations if necessary.

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

| | | |
|--|--|--|
| | | |
|--|--|--|

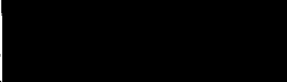
If you have made representations before relating to this premises please state what they were and when you made them

| |
|--|
| |
|--|

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 a company please state in what capacity.

Signature 
Date 21/1/12
Capacity Local Resident

| | |
|---|-----------|
| 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.