



BROMSGROVE DISTRICT COUNCIL

MEETING OF THE LICENSING SUB-COMMITTEE

FRIDAY 5TH JUNE 2015 AT 10.30 A.M.

THE COUNCIL HOUSE, BURCOT LANE, BROMSGROVE

MEMBERS: To be determined

AGENDA

LICENSING SUB-COMMITTEE HEARING PROCEDURE (Pages 1 - 4)

1. Appointment of Chairman for the meeting
2. To receive apologies for absence and notification of substitutes
3. Declarations of Interest

To invite Councillors to declare any Disclosable Pecuniary Interests or Other Disclosable Interests they may have in items on the agenda, and to confirm the nature of those interests.
4. Application for a Premises Licence in respect of Co-operative Food, 30 Gibb Lane, Catshill, Bromsgrove, B61 0JR (Pages 5 - 34)
5. To consider any other business, details of which have been notified to the Head of Legal, Equalities and Democratic Services prior to the commencement of the meeting and which the Chairman, by reason of special circumstances, considers to be of so urgent a nature that it cannot wait until the next meeting

K. DICKS
Chief Executive

The Council House
Burcot Lane
BROMSGROVE
Worcestershire
B60 1AA

21st May 2015

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Appendix

LICENSING SUB-COMMITTEE (Premises)

HEARING PROCEDURE

1. The Chairman will open the hearing and introduce Members of the Sub-Committee and officers present.
2. The Chairman will ask parties to the proceedings to introduce themselves.
3. In the event the Applicant is not represented, the Chairman will remind the Applicant that he/she can be represented by a legal representative at his/her own expense.
4. The Licensing Officer, Worcestershire Regulatory Services will present the report.
5. The Chairman will invite Members of the Sub-Committee and all parties to the proceedings to put any relevant questions to the Licensing Officer.
6. The Chairman will invite the Applicant and/or his/her representative to present his/her case and call any witnesses. The Applicant will be allowed a maximum of 10 minutes to present the case.
7. The Chairman will invite Members of the Sub-Committee and all parties to the proceedings to put any relevant questions to the Applicant and/or his/her representative.
8. The Chairman will invite the Responsible Authorities to present their representations. New representations must not be raised. The Responsible Authorities will be allowed a total of 10 minutes to present their case(s). If two or more Responsible Authorities wish to address the Sub-Committee the 10 minutes will be divided between them.
9. The Chairman will invite Members of the Sub-Committee and all parties to the proceedings to put any relevant questions to the Responsible Authorities.
10. All other Parties to the proceedings will be invited to present their representations or elect a spokesperson to speak on their behalf. New representations must not be raised. A maximum of 10 minutes will be allowed for the Parties to present their case(s). If two or more Parties wish to address the Sub-Committee the 10 minutes will be divided between them.

Appendix

11. **The Chairman will invite Members of the Sub-Committee, the applicant / applicant's representative and the Responsible Authorities to put any relevant questions to the other Parties**
12. **The other Parties will be invited to sum up. A maximum of 5 minutes will be allowed.**
13. **The Responsible Authorities will be invited to sum up. A maximum of 5 minutes will be allowed.**
14. **The Applicant and/or his/her representative will be invited to sum up. A maximum of 5 minutes will be allowed.**
15. **The Chairman will ask the Legal Advisor if there is any legal advice to be given.**
16. **At the conclusion of the hearing Members of the Sub-Committee, the Legal Advisor and the Democratic Services Officer will withdraw from the meeting room so that the Sub-Committee can reach its decision in private**
17. **The Sub-Committee's decision will be sent to the Applicant and those parties who made representations within 5 working days.**

Appendix

Please Note:

1. ***Each application coming before the Licensing Sub-Committee will be treated on its own merits, and the Sub-Committee will take its decision based upon:***
 - a) ***the promotion of the four licensing objectives, as given by the Licensing Act 2003, namely:***
 - ***the prevention of crime and disorder;***
 - ***public safety;***
 - ***the prevention of public nuisance; and***
 - ***the protection of children from harm;***
 -
 - b) ***Bromsgrove District Council's Statement of Licensing Policy;***
 - c) ***guidance issued under section 182 of the Licensing Act 2003; and***
 - d) ***the Licensing Act 2003.***
2. ***The Chairman may require any person who in his/her opinion is behaving in a disruptive manner to leave the meeting, and may refuse to permit that person to return, or permit him/her to return only on such conditions as the Chairman may specify. However, such person may, before the end of the hearing, submit in writing any information which he/she would have been entitled to have given orally at the meeting had he/she not been required to leave.***
3. ***Decisions may be taken in the absence of the Applicant or any other party. All notices and representations received from absent parties will be considered.***
4. ***Questioning must not be hostile or intended to unfairly undermine the position of any party.***
5. ***Late evidence will only be considered with the agreement of all parties present.***
6. ***The decision of the Sub-Committee will be sent to all parties within 5 working days.***
7. ***An appeal to the Magistrates' Court against the Sub-Committee's decision must be lodged within 21 days of the date on which all parties were notified in writing of the decision of the Licensing Sub-Committee.***

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BROMSGROVE DISTRICT COUNCIL

LICENSING SUB-COMMITTEE

5th June 2015

APPLICATION FOR GRANT OF A PREMISES LICENCE UNDER THE LICENSING ACT 2003

Relevant Portfolio Holder	Councillor P. Whittaker
Portfolio Holder Consulted	No
Relevant Head of Service	Ivor Pumfrey – Acting Head of Worcestershire Regulatory Services.
Wards Affected	Catshill South
Non-Key Decision	

1. SUMMARY OF PROPOSALS

- 1.1 To consider an application for a premise licence for Co-operative Food, 30 Gibb Lane, Catshill, Bromsgrove, B61 0JR. This application is brought before the Licensing Sub-Committee following receipt of relevant representations.

2. RECOMMENDATIONS

- 2.1 **The Sub-Committee is asked to RESOLVE**

whether or not, having regard to the licensing objectives, the Guidance issued under section 182 of the Licensing Act 2003, the District Council’s Statement of Licensing Policy, the applicant’s proposed Operating Schedule and relevant representations made by other parties;

- 1) **To grant or refuse the application, as shown in the application form attached at Appendix 1 to the report.**
- 2) **If the Licensing Sub-Committee is minded to approve the application;**
 - a) **to attach relevant Mandatory Conditions; and**
 - b) **to consider, with due regard to the statutory licensing objectives and the relevant representations received, whether to attach any appropriate conditions.**

3. KEY ISSUES

Financial Implications

- 3.1 The Statutory Fee of £315.00 has been paid, and the application has been duly advertised in accordance to the requirements of the Licensing Act 2003.

LICENSING SUB-COMMITTEE

5th June 2015

Legal Implications

- 3.2 The Sub-Committee should have regard to any National Guidance set down under S182 of the Licensing Act 2003 and Bromsgrove District Council's Statement of Licensing Policy.
- 3.3 The Sub-Committee is obliged to determine this application with a view to the promotion of the licensing objectives which are:
- The Prevention of Crime and Disorder
 - Public Safety
 - The Prevention of Public Nuisance
 - The Protection of Children from Harm.
- 3.4 The Sub-Committee must also have regard to the representations made and the evidence it hears.
- 3.5 The Sub-Committee must take such of the following steps as it considers necessary for the promotion of the licensing objectives:
- (a) Grant the application as asked
 - (b) Modify or impose conditions on the licence, by altering or omitting or adding to them.
 - (c) Reject the application.
- 3.6 The Sub-Committee is asked to note that it may not modify the conditions or reject the whole or part of the application merely because it considers it desirable to do so. It must actually be appropriate in order to promote the licensing objectives.
- 3.7 The Human Rights Act 1998 incorporates human rights under the European Convention into English law. Article 6 provides that, in the determination of a person's civil rights, everyone is entitled to a fair and public hearing. In this respect, third parties who have made relevant representations, and of course, applicants themselves, should be allowed to address the Sub-Committee.

Service/Operational Implications

- 3.8 An application for grant of premises licence for Co-operative Food, 30 Gibb Lane, Catshill, Bromsgrove, B61 0JR, made by Co-operative Group Food Ltd was received by Bromsgrove District Council on the 27th March 2015. The application seeks permission to use the premises for the sale by retail of alcohol for consumption off the premises during the following hours:

Every day: 06:00 – 23:00

The application is attached as **Appendix 1**.

LICENSING SUB-COMMITTEE

5th June 2015

- 3.9 The Licensing Authority has received three relevant representations objecting to the application, made by members of the public. Copies of the representations received are attached as **Appendix 2**.
- 3.10 The representations raise concerns about the promotion of the following licensing objectives:
- Prevention of crime and disorder
 - Prevention of public nuisance
- 3.11 A plan of the location of the premise is attached as **Appendix 3**.

Customer / Equalities and Diversity Implications

- 3.12 None

4. RISK MANAGEMENT

- 4.1 None

5. APPENDICES

Appendix 1 Application Form
Appendix 2 Relevant representations received
Appendix 3 Location plan

6. BACKGROUND PAPERS

Licensing Act 2003
Guidance under S182 of the Licensing Act 2003
Statement of Licensing Policy

AUTHOR OF REPORT

Name: Dave Etheridge, Senior Licensing Practitioner
E Mail: d.etheridge@worcsregservices.gov.uk
Tel: (01905) 822799

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**Application for a premises licence to be granted
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/We Co-operative Group Food Ltd

(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description Co-operative Food (Formerly Ivy Cottage Public House), 30 Gibb Lane, Catshill			
Post town	Bromsgrove	Postcode	B61 0JR
Telephone number at premises (if any)			
Non-domestic rateable value of premises		New Build - £315.00 fee provided	

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | | |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i. as a limited company | <input checked="" type="checkbox"/> | please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> | please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | please complete section (B) |
| d) a charity | <input type="checkbox"/> | please complete section (B) |

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- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
 - statutory function or
 - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name Co-operative Group Food Ltd
Address Dept 10227 1 Angel Square Manchester M60 0AG
Registered number (where applicable) IP26715R
Description of applicant (for example, partnership, company, unincorporated association etc.) Company
Telephone number (if any)
E-mail address (optional)

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Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

Proposed convenience retail store, to trade 7 days a week, selling groceries, sundry items and alcohol for consumption off the premises only.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any that apply

- | | |
|---|--------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

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Provision of late night refreshment (if ticking yes, fill in box I)

Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			
Thur			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish	Outdoors		
			Both	<input type="checkbox"/>	
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed				
Thur			State any seasonal variations for the playing of recorded music (please read guidance note 4)	
Fri				
Sat				
Sun			Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 5)	

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish			
Mon					
Tue					
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
Day	Start	Finish	Both <input type="checkbox"/>		
Mon	06:00	23:00	State any seasonal variations for the supply of alcohol (please read guidance note 4) None Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5)		
Tue	06:00	23:00			
Wed	06:00	23:00			
Thur	06:00	23:00			
Fri	06:00	23:00			
Sat	06:00	23:00			
Sun	06:00	23:00			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name	Rachel Keen
Postcode	
Personal licence number (if known) 10/00931/LIQPL	
Issuing licensing authority (if known) Tewkesbury Borough Council	

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K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8).

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon			<p>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)</p> <p>No opening hours prescribed.</p>
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)

The applicant has given thought to the potential impact of the grant of this application on the four licensing objectives and, having regard to the locality, considers that the following conditions are appropriate.

b) The prevention of crime and disorder

1. The premises shall maintain a CCTV system which gives coverage of all entry and exit points. The system shall continually record whilst the premises are open and conducting licensable activities. All recordings shall be stored for a minimum period of 28 days and shall be capable of being easily downloaded. Recordings shall be made available upon the receipt of a request by an authorised Officer of the Police or the Local Authority.

2. There shall be "CCTV in Operation" signs prominently displayed at the premises.

3. An incident log (whether kept in a written or electronic form) shall be retained at the premises and made available to an authorised Officer of the Police or the Local Authority.

4. The premises shall operate a proof of age scheme, such as a Challenge 25, whereby the only forms of acceptable identification shall be either a photographic driving licence, a valid passport, military identification or any other recognised form of photographic identification incorporating the PASS logo, or any other form of identification from time to time approved by the secretary of the state.

5. The premises will be fitted with a burglar alarm system

6. The premises will be fitted with a panic button system for staff to utilise in the case of an emergency.

c) Public safety

The premises licence holder shall ensure that the appropriate fire safety, and health and safety regulations are applied at the premises.

d) The prevention of public nuisance

A complaints procedure will be maintained, details of which will be made available in store and upon request.

e) The protection of children from harm

1. All staff will receive comprehensive training in relation to age restricted products and in particular the sale of alcohol. No member of staff will be permitted to sell age restricted products until such time as they have successfully completed the aforementioned training.
2. An age till prompt system will be utilised at the premises in respect of age restricted products.
3. A refusals register (whether kept and written or electronic form) will be maintained at the premises and will be made available for inspection upon request by an authorised Officer of the Police or the Local Authority

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.
- I understand that I must now advertise my application.
- I understand that if I do not comply with the above requirements my application will be rejected.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 11).
If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	26 March 2015
Capacity	Solicitor acting on behalf of the applicant

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For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

Miss Suzanne Blewitt
Ward Hadaway
Sandgate House
102 Quayside

Post town

Newcastle

Postcode

NE1 3DX

Telephone number (if any)

0191 204 4491

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)

suzanne.blewitt@wardhadaway.com

Notes for Guidance

1. Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

PART A

Consent of individual to being specified as premises supervisor

I, RACHAEL LOUISE KEEN

Of,

_____ hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for THE PREMISES by Co-operative Group Food Ltd relating to a premises licence for (store address) (Former Ivy Cottage Public House), 30 Gibb Lane, Catshill, Bransgrave, B61 0JR

and any premises licence to be granted or varied in respect of this application made by Co-operative Group Food Ltd concerning the supply of alcohol at (store address) (Former Ivy Cottage Public House), 30 Gibb Lane, Catshill, Bransgrave, B61 0JR.

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number 10100931 / LIQPL

Personal licence issuing authority TENKISBOUY BOROUGH COUNCIL

.....signed
RACHAEL KEEN.....name (please print)
.....18-3-15.....dated

PART B
(Head Office use only)

I/We [full name of premises licence holder(s)] the premises licence holder of premises licence number [insert premises licence number] relating to [name and address of premises to which the application relates] hereby give my consent for the transfer of premises licence number [insert premises licence number] to [full name and transferee]

.....signed
.....name (please print)
.....dated

Sayful Alom

From: wrsenquiries
Sent: 24 April 2015 11:43
To:
Subject: RE: Licence application

Dear

Thank you for your email I have logged your concerns with our team and your ref number is 15/04489/LIACEN

Kind Regards
Wendy Davies
Duty Officer
Tel: 01905 822799
Fax: 01562 745516
Email: wrsenquiries@worcsregservices.gov.uk
E-mail: wdavies@worcsregservices.gov.uk
Website: <http://www.worcsregservices.gov.uk/> (open in Google Chrome) Worcestershire Regulatory Services Wyre
Forest House Finepoint Way Kidderminster
DY11 7WF

Environmental Health, Trading Standards & Licensing

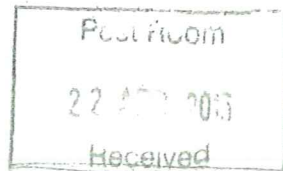
-----Original Message-----

From:
Sent: 24 April 2015 11:54
To: wrsenquiries
Subject: Licence application

Dear Sir

Having seen a notice at the site of the old Ivy Cottage in Catshill I feel I should voice my concern that the granting of a licence to sell alcohol via the Co- operative Society could cause problems in the vicinity of an increase in alcohol abuse and ant-social behaviour. I do hope that these issues will be taken VERY seriously as Catshill already has many problems in these areas. My husband and I attend the Baptist Church opposite this site and would hope that the redevelopment of the site would enhance the community and not encourage more harmful activities merely for the commercial gain of the retailer.

Yours sincerely



Registered Charity 1134872



Dear Licensing Department,

I am writing on behalf of Catshill Baptist Church to express our concern at the proposed licence for the Co-OP (to be built on the site of the IVY COTTAGE public house opposite Catshill Baptist Church in Gibb Lane, Catshill.) to sell Alcohol from 0600 am to 2300 pm.

We feel that this proposal is excessive and should not be allowed bearing in mind the problems that the local community has experienced in the past with other local shops irresponsibly selling alcohol. This has led to countless problems with alcohol related and youth bad behaviour in the area.

We have been helping the Police and local authorities to try to alleviate these problems and now feel that this will adds to the problems.

As a matter of principal, we feel that the selling of Alcohol should be better controlled.

We are concerned about the possibility of damage to the Church and the adverse effects of people using our car park, causing litter, broken glass etc, etc.

We would ask for serious consideration to be given to this proposal and at least cut down the hours which Alcohol can be sold.

Many thanks.

Yours sincerely

P.Fisher

Church Secretary

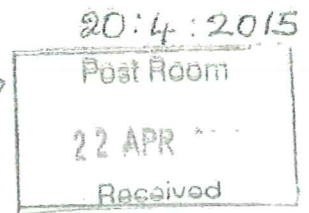
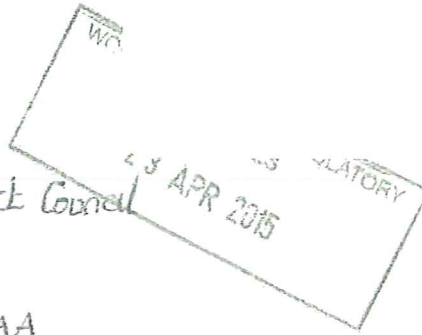
Catshill Baptist Church.

Interim Minister: Revd Alan Pain
19 New House Farm Drive
Northfield
Birmingham B31 2FN

Church Secretary: Mr Paul Fisher
Catshill Baptist Church
Milton Road
Catshill
Bromsgrove B61 0NA

Church Treasurer: Mr Andrew Shirley
Catshill Baptist Church
Milton Road
Catshill
Bromsgrove B61 0NA

Licensing Dept
Bromsgrove District Council
Council Offices
Burcot Lane,
Bromsgrove B60 1AA



Former Ivy Cottage premises

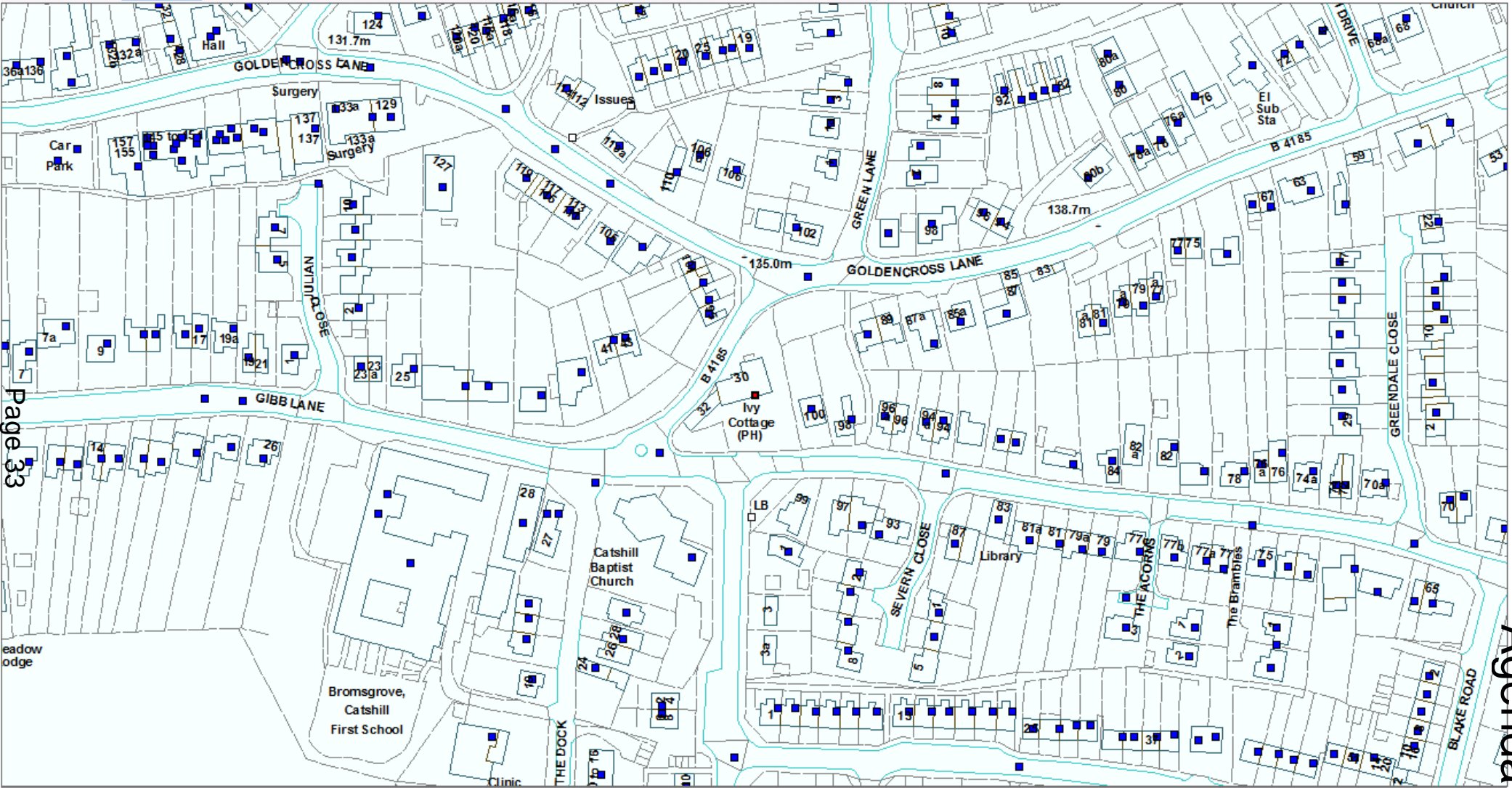
Dear Sirs,

We are writing to object to the application by the Co-operative Retailers, for a license to sell alcohol during the hours 7 am till 11.00 pm at the above site on the corner of Lybb Lane & Borley Mow Lane, Catshill.

Our objections relate to the nuisance factor these lengthy licensing hours will attract because -

- 1) The site is in a residential area in close proximity to many homes & on a busy road junction.
- 2) Opposite the site there is a Church which hosts clubs for children & the elderly amongst others in the community.
- 3) The availability of alcohol till 11pm will encourage teenagers etc to hang around the adjacent Parish Garden, the church car park opposite, as well as on the store car park, till late at night.

Alcohol is already available at many outlets in the village & these hours seem excessive & not in the interest & well being of the whole community. Yours faithfully



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