

WEST LINDSEY DISTRICT COUNCIL

LICENSING ACT 2003

Reference Number:	TBC
Application type:	Application for the Grant of Premises Licence
Premise:	AVK Stores, 324 Ropery Road, Gainsborough, Lincolnshire DN21 2PD
Applicant:	Mr Vipin Kumar Venugopal

1 The Application

- 1.1 The application made is for the grant of a new premises licence under section 17 of the Licensing Act 2003.
- 1.2 The application submitted is requesting authorisation for the retail sale of alcohol (for consumption off the premises only). The full application with all the relevant details is attached as Appendix 1.

2 Background

- 2.1 There is no record of the premises being previously licensed.

3 Promotion of the Licensing Objectives

- 3.1 In submitting the application the applicant is required to describe any steps intended to be taken in order to promote the following 4 licensing objectives, which are:
 - The Prevention of Crime and Disorder
 - Public Safety
 - The Prevention of Public Nuisance
 - The Protection of Children from Harm

- 3.2 The steps the applicant intends to take are detailed in an appendix to section M (a-e), at the end of the application form (Appendix 1).

4 Representations – Responsible Authorities

- 4.1 None.

5 Representations – Other Persons (previously known as Interested Parties)

- 5.1 Seven representations have been received from Other Persons (formerly known as Interested Parties). These are from Carol Booth, Diane Rowe &

Brian Fraser, Don Middleton, HJF & JM Curtis, Kerry Manson, Mr Ella and Mrs Garner. These are attached as Appendix 2a, 2b, 2c, 2d, 2e, 2f, and 2g for Members' perusal.

- 5.2 The Licensing Team has also received a two-page paper from the community with 86 signatures on, with the top paragraph which reads, "*An alcohol licence has been applied for at the premises on the junction of Melrose and Ropery Road, if you have any objection to this please support the community and sign for this action no to go ahead*". This has not been included as an appendix to the report due to being unable to make the signatories aware that it may be made available in a public domain.

6 Considerations

- 6.1 Each application must be considered on its own merits, **standardised conditions cannot be applied across the board** to all licences of a similar type.
- 6.2 Each representation must be considered and in each case the committee must satisfy themselves whether or not the licensing objectives are being met by the applicant with respect to each matter.
- 6.3.1 Therefore, before any conditions can be imposed on a licence, they have to be *appropriate for the promotion of the licensing objectives and where there are other legislative provisions which are relevant and must be observed by the applicant, no additional conditions are appropriate to promote the licensing objectives*. Conditions must be *proportionate, reasonable, and capable of being directly complied with by the licensee*. Furthermore, conditions should be clear and understandable, not be imposed to achieve an ulterior motive outside the scope of the legislation, not over generalised and cannot override primary legislation. If the Sub-Committee are minded that a condition is not appropriate for the promotion of the licensing objectives, then it should not be imposed.
- 6.3.2 Clearly, the Sub-Committee have to *consider extremely carefully* whether or not additional conditions need to be attached in order for the promotion of the licensing objectives?
- 6.4 In making its decision the committee must consider the application in line with the following:
- The Licensing Act 2003
 - The Section 182 Guidance made under the Act
 - The Licensing Authority's Licensing Policy Statement
 - Decisions handed down from any relevant case law by the Courts where relevant
- 6.5 Policy Considerations
- 6.5.1 When considering the application and representations received, attention is drawn to the Licensing Authority's Policy which can be found at the link below by clicking on the Download Tab, then downloading the Policy:
<http://www.west-lindsey.gov.uk/businesses/licensing/licensing-and-gambling-policies/licensing-policy/104810.article>

6.6 Statutory Guidance

6.6.1 Attention is also drawn to the contents of the section 182 statutory guidance which can be found at the link below:

<https://www.gov.uk/government/publications/explanatory-memorandum-revised-guidance-issued-under-s-182-of-licensing-act-2003>

7 Options

7.1 Licensing Act 18(2) Subject to subsection (3) below, the authority must grant the licence in accordance with the application subject only to-

- (a) such conditions as are consistent with the operating schedule accompanying the application, and
- (b) any conditions which must under section 19, 20 or 21 be included in the licence.

(3) Where relevant representations are made, the licensing authority must –

- (a) hold a hearing to consider them, unless the authority, the applicant and each person who has made such representations agree that a hearing is unnecessary, and
- (b) having regard to the representations, take such of the steps mentioned in subsection (4) (if any) as it considers necessary for the promotion of the licensing objectives.

(4) The steps are –

- (a) to grant the licence subject to-
 - (i) the conditions mentioned in subsection (2)(a) modified to such extent as the authority considers appropriate for the promotion of the licensing objectives, and
 - (ii) any condition which must under section 19, 20 or 21 be included in the licence;
- (b) to exclude from the scope of the licence any of the licensable activities to which the application relates;
- (c) to refuse to specify a person in the licence as the premises supervisor;
- (d) to reject the application;

(5) For the purposes of subsection (4)(a)(i) the conditions mentioned in subsection (2)(a) are modified if any of them is altered or omitted or any new condition is added.

Conditions cannot be attached with respect to any part of the application on which no representation(s) have been received.

This is a matter for the committee to determine in light of the above matters and any others it considers relevant.

N.B. Whatever decision the Members of the Licensing Sub-Committee arrive at, they are reminded about the comments made in a recent court case, known as Hope and Glory, in relation to reasons for their decision making. The comments noted from this case stated: “*The fuller and clearer the reasons, the more force they are likely to carry*”. Therefore taking these comments into account, Members are strongly advised to give good, clear,

justifiable reasons in relation to their decision, which will have more chance of being upheld, should the decision be appealed against.

8 List of Appendices

Appendix 1	Application Form
Appendices 2a – 2g	Representations from Other Persons

9 Background Papers

Licensing Act 2003
WLDC Statement of Licensing Policy
Guidance made under section 182 of the Licensing Act 2003

Appendix 1

PD £100 KSK100005306
10-4-17



**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 VIPIN KUMAR VENUGOPAL
(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			
324 ROPEY ROAD GAINSBOROUGH LINCOLNSHIRE DN21 2PD			
Post town	GAINSBOROUGH	Postcode	DN21 2PD
Telephone number at premises (if any)	N/A		
Non-domestic rateable value of premises	£ UNKNOWN		

Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i as a limited company/limited liability partnership please complete section (B)
 - ii as a partnership (other than limited liability) please complete section (B)
 - iii as an unincorporated association or please complete section (B)
 - iv other (for example a statutory corporation) please complete section (B)
- c) a recognised club please complete section (B)
- d) a charity please complete section (B)
- 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 (by ticking yes to one box below):

- 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 checked="" type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Other Title (for example, Rev)	<input type="text"/>
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Surname VENUGOPAL	First names NIPIN
Date of birth over	[REDACTED]
Nationality	[REDACTED]
Current reside address if diff premises addr	[REDACTED]
Post town	[REDACTED]
Daytime cont	[REDACTED]
E-mail address (optional)	[REDACTED]

SECOND INDIVIDUAL APPLICANT (if 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		
Date of birth over		I am 18 years old or		<input type="checkbox"/>	Please tick yes
Nationality					
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
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
10	05	2017

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)

A small off license convenience shop to be named as "ANK stores". The shop will have stationary and grocery items as well as soft drinks, frozen foods and fruits. The shop is planned to run from 05:30 till 22:00 on 7 day basis and till 00:00 hrs on special days. The premises will uphold all the factors mentioned in licensing objectives without any compromise.

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

N/A

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

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

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

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

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 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)					
Mon								
Tue								
Wed						<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur								
Fri						<u>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</u> (please read guidance note 6)		
Sat								
Sun								

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
			State any seasonal variations for the exhibition of films (please read guidance note 5)		
Tue					
			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 (please read guidance note 6)		
Wed					
Thur					
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Tue			
Wed			
Thur			
Fri			<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 6)
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
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 6)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 5)		
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 6)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur					
Fri			<u>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</u> (please read guidance note 6)		
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)		
Mon					
			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Tue					
			<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 6)		
Wed					
Thur					
Fri					
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 4)		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)		
Fri					
Sat			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 (please read guidance note 6)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)	
Mon				
Tue				
			State any seasonal variations for the provision of late night refreshment (please read guidance note 5)	
Wed				
Thur				
			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 (please read guidance note 6)	
Fri				
Sat				
Sun				

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	05:30	22:00	I would like to open the premises till 00:00 hrs on special days like easter day, christmas, boxing day, new year, new years eve.		
Tue	05:30	22:00			
Wed	05:30	22:00			
Thur	05:30	22:00	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 6)		
Fri	05:30	22:00			
Sat	05:30	22:00			
Sun	05:30	22:00			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name		NIPIN KUMAR VENUGOBAL	
Date of birth		[REDACTED]	
Address		[REDACTED]	
Postcode		[REDACTED]	
Personal licence number (if known)		320HA17022	
Issuing licensing authority (if known)		WEST LINDSEY DISTRICT COUNCIL, GOINGSBOROUGH	

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 9).

N/A

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	<p>I would like to open the premises till 00:00 hrs on special days like easter, christmas eve, christmas, new years eve, new years and boxing day.</p>
Mon	05:30	22:00	
Tue	05:30	22:00	
Wed	05:30	22:00	
Thur	05:30	22:00	
Fri	05:30	22:00	
Sat	05:30	22:00	
Sun	05:30	22:00	
			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 6)

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 10)

Please see attached sheet

b) The prevention of crime and disorder

Please see attached sheet

c) Public safety

Please see attached sheet

d) The prevention of public nuisance

Please see attached sheet

e) The protection of children from harm

Please see attached sheet

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.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	<ul style="list-style-type: none"> [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)
Signature	
Date	10/01/2017
Capacity	OWNER

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). 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 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

Information on the Licensing Act 2003 is available on the website of GOV UK at <https://www.gov.uk/guidance/alcohol-licensing>

Or from the Licensing Team, West Lindsey District Council, Guildhall, Marshall's Yard, Gainsborough, Lincolnshire DN21 2NA

Telephone: 01427 676676

Email: licensing.2003@west-lindsey.gov.uk

Data Protection Act 1998: We will use the information you give us to (a) do the tasks we need to do for the job shown in the title of this form (b) carry out any of our official business (c) stop fraud or crime. Under the Act, West Lindsey District Council is the data controller (the holder, user and processor of data) for the information you have given us."

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information, see www.west-lindsey.gov.uk/fairprocessingnotice or contact the finance department on, 01427 676560, FinanceTeam@west-lindsey.gov.uk

APPENDIX To M (a-e)

a) General - all four licensing objectives

All staff will be trained in their responsibilities with regard to the sale of alcohol and the requirements of the premises licence.

Training records shall be retained for a period of 12 months and made available for inspection upon request by a Police Officer or Officer of the Licensing Authority. I will install good signage stating age restrictions.

b) Prevention of Crime and Disorder:

A CCTV system shall be installed, recording and maintained in working order and operated at the premises to the satisfaction of Lincolnshire Police, specifically:

- *There shall be a minimum of one high resolution camera fitted in a weatherproof housing, for external coverage of the entrance.*
- *There shall be a minimum of one high-resolution colour camera fitted to each public entrance/exit to provide a quality head and shoulder image for facial recognition/identification purposes of all persons entering the premises.*
- *There shall be sufficient cameras able to cope with the normal operating illumination to reasonably cover all licensed public areas.*
- *Recordings must be kept for a minimum of 31 days and endorsed with the accurate, correct time/date (BST/GMT adjusted).*
- *The frame rate shall be maintained to a standard whereby any footage produced is of sufficient quality to be of evidential use.*
- *Police and/or Licensing Officers shall be able on attendance to view playback of any incident without the necessity for download.*
- *Recordings of incidents at the premises must be provided to the police following lawful request.*
- *A member of staff should be on the premises at all times they are open to the public who is capable of operating the CCTV system and providing recordings on request. When this is not possible recordings will be provided within 24 hours of the original request.*
- *Recording equipment shall be housed in a secure room/cabinet where access and operation is strictly limited to authorised persons.*

An incident book shall be kept at the premises. in which details of crime and/or disorder relating to the premises shall be recorded.

The Incident book shall contain the following details;

- *Time, date and location of incident.*
- *Nature of the Incident*

- *Names, addresses and contact details of persons involved.*
- *Result of the incident*
- *Action taken to prevent further such incidents.*

Each entry signed by the DPS or other responsible person employed at the premises and so authorised by the DPS.

The Incident Book shall be made available to Police upon request.

Each entry shall be retained for a period of 12 months from date of completion.

C) public safety

I will conduct and document risk assessment on regular basis. Ensure that all the electrical and fire alarming systems are in good conditions and will check on daily basis. Free drinking water will be available at all time. Fire and safety training procedures will be maintained. A CCTV system shall be installed, recording and maintained in working order and operated at the premises to the satisfaction of Lincolnshire Police.

D) The prevention of public nuisance

The premises will have good sound proof walls. No loud musics or any will be played during working hours or later. No entertainment will be carried out inside / outside the premises which creates nuisance to the public. I will have disposal bins so that the litters can be disposed safely and install signage to direct the customers to do so.

e) Protection of Children from Harm:

There shall be in place for the premises a written policy to prevent the sale or supply of alcohol to persons under 18 years of age. That policy shall require any person who appears to be under the age of 21 years (or 25 if 'Challenge 25' in operation) to produce one of the following forms of identification, which is compliant with the following:

1. Full UK Photo Driving Licence
2. Passport
3. A recognised proof of age card accredited under the Proof of Age Standards Scheme (PASS)

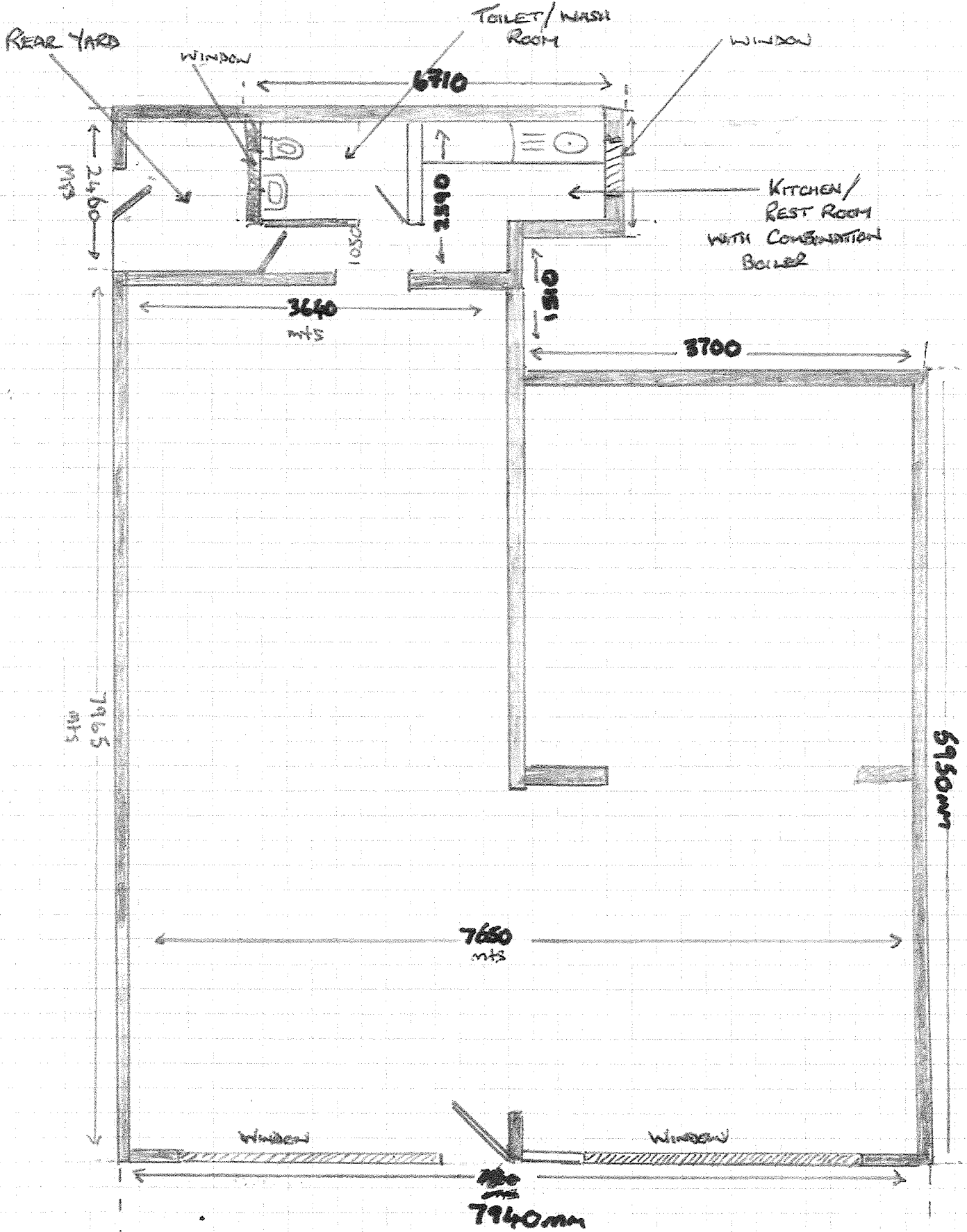
A notice or notices shall be displayed in and at the entrance to the premises where they can be clearly seen and read and shall indicate:

- That it is unlawful for persons under 18 to purchase alcohol or for any person to purchase alcohol on behalf of a person under 18 years of age.

- That proof of age may be requested at the premises and those accepted means for proof of age listed as above.

All point of sale staff shall undergo training in the above policy with a record kept of the date of training, signed by the member of staff and the trainer. Each entry shall be retained for a period of 12 months from date of completion.

This record shall be made available for inspection by Lincolnshire Police Officers or other parties acting on their behalf.



CAR PARKING

Appendix 2a

West Lindsey District Council
05 MAY 2017
POST ROOM



Licensing Act 2003 Representation by Other Persons

Note: Please be aware that this form may be viewed by the Applicant or by a representative of the Applicant. It may also be read out in public at the sub-committee hearing.

Representations can be made against a relevant licence application by an interested party. Representations may be made on behalf of the above by a representative e.g. MP, solicitor, or a friend.

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1. **The Prevention of Crime and Disorder**
2. **Public Safety**
3. **Prevention of Public Nuisance**
4. **The Protection of Children from Harm**

Representations may be made at any time during a period of 28 consecutive days starting on the day after the application was given to the Licensing Authority.

In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please provide contact details of 'Other Persons'.

Name:	CAROL BOOTH.
Address:	235 ROPERY ROAD GAINSBOROUGH LINES
Postcode:	DN21 2PD
Tel:	01427 811392
E-mail:	booth235@btmail.co.uk.

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	UJIN KUMAR VENUGOPAL.
Address of Premises	324 ROSEBY ROAD GAINSBOROUGH DN21 2PD
Application Details:	SUPPLY OF ALCOHOL (OFF THE PREMISES) MON-SUN 5.30-22.00.

Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- **The Prevention of Crime and Disorder**
- **Public Safety**
- **Prevention of Public Nuisance**
- **The Protection of Children from Harm**

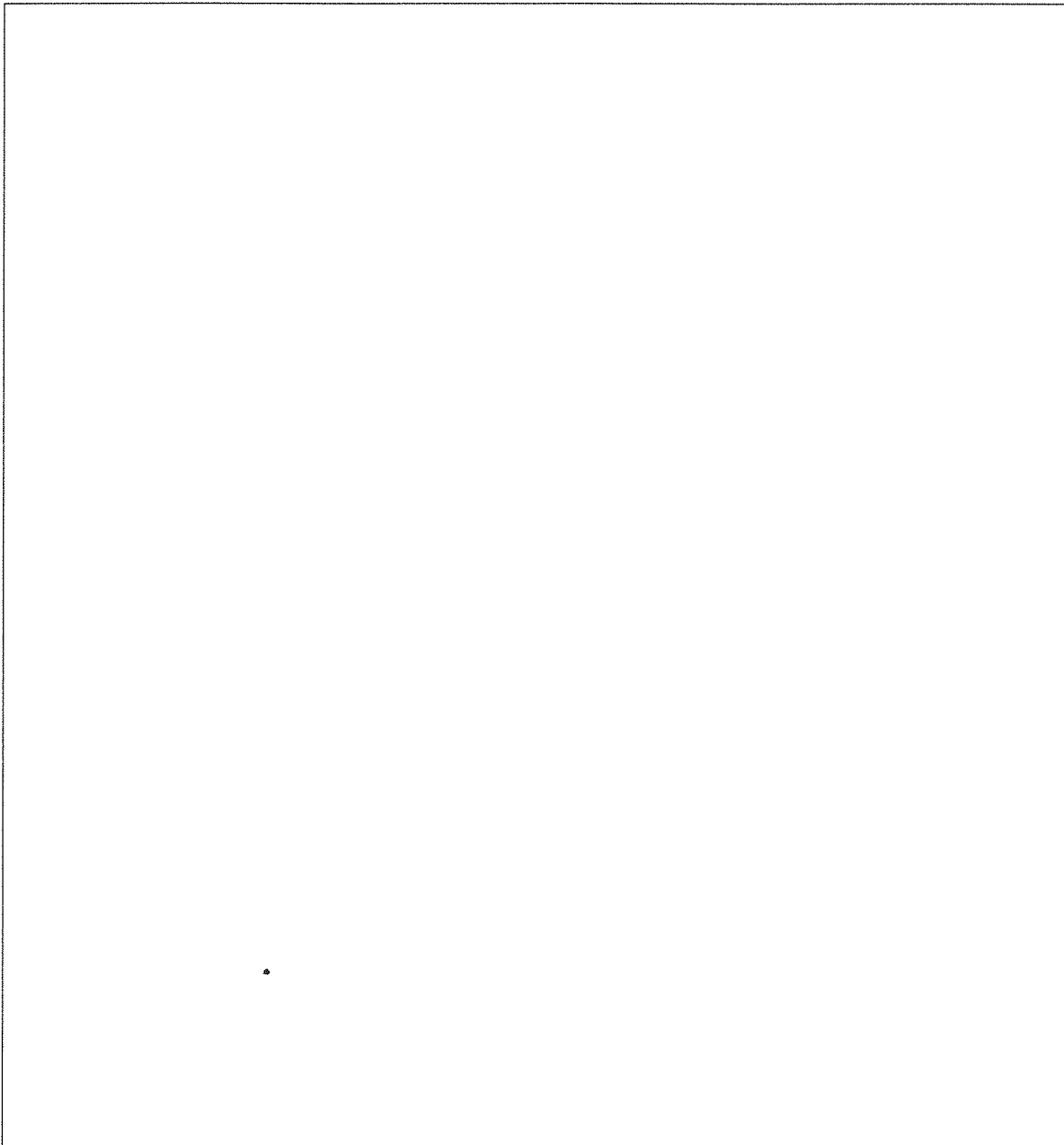
Details of representation.....

I WISH TO OBJECT TO THE ABOVE APPLICATION FOR THE FOLLOWING REASONS:-

- THE PREMISES ARE IN A RESIDENTIAL AREA.
- THERE ARE NO PARKING FACILITIES. IT IS ON A VERY BUSY MAIN ROAD - DOUBLE YELLOW LINES OUTSIDE, NEXT TO A BUS STOP AND ON A JUNCTION FREQUENTLY USED BY EMERGENCY VEHICLES (FIRE ENGINES) (MELROSE ROAD ONTO ROSEBY ROAD) ANY VEHICLES PARKED OUTSIDE WHILE PEOPLE 'POP IN' TO THE SHOP WOULD CAUSE SEVERE DANGER TO ALL ROAD USERS AND PEDESTRIANS.
- THE PREMISES ARE IN VERY CLOSE PROXIMITY TO A PRIMARY SCHOOL.
- SUCH LICENCED PREMISES ARE LIKELY TO ATTRACT GROUPS OF YOUNG PEOPLE AT ALL TIMES OF THE DAY AND NIGHT WITH THE RISK OF PUBLIC DISORDER AND CAUSING PUBLIC NUISANCE / CRIME
- I UNDERSTAND THAT THERE HAVE BEEN ISSUES OF DISORDER / PUBLIC NUISANCE AT THE APPLICANT'S CURRENT PREMISES CAUSING REASONS OF CONCERN.

- THERE ARE ALREADY SUFFICIENT CONSUMPTION LICENCED PREMISES IN THE AREA - THERE IS NO 'NEED' FOR THIS APPLICATION TO BE GRANTED
- IT IS EXTREMELY LIKELY THAT GRANTING THIS LICENCE WILL MEAN AN INCREASE IN CRIME, PUBLIC NUISANCE OFFENCES AND GENERAL DISORDER IN THE IMMEDIATE AND SURROUNDING AREA.
- THE APPLICANT'S CURRENT BUSINESS SELLS A 'LEGAL HIGH' WHICH IS A BIG CONCERN AND REITERATES ALL THE CONCERNS AND WORRIES STATED ABOVE.

If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives



Once the Licensing Team has received this form you will receive a written acknowledgment and you may be contacted to discuss the issue prior to any referral to a sub-committee hearing.

Please tick this box if you consent to any notice of any hearing being sent to you to the e-mail address provided by you above. (Please note if any notice is sent to you by electronic means, you will also receive confirmation of the same in writing).

Please tick this box if you do not intend to attend or be represented at any hearing.

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed: Carol Booth.....

Dated: 3/5/17.....

Print Name CAROL BOOTH.....

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk

Appendix 2b



West Lindsey District Council
08 MAY 2017
POST ROOM

Licensing Act 2003

Representation by Other Persons

Note: Please be aware that this form may be viewed by the Applicant or by a representative of the Applicant. It may also be read out in public at the sub-committee hearing.

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Representations are only relevant to an application if they relate to at least one of the four **Licensing Objectives** listed below:

1. **The Prevention of Crime and Disorder**
2. **Public Safety**
3. **Prevention of Public Nuisance**
4. **The Protection of Children from Harm**

Representations may be made at any time during a period of 28 consecutive days starting on the day after the application was given to the Licensing Authority.

In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please provide contact details of 'Other Persons'.

Name:	DIANE ROWE AND BRIAN FRASER.
Address:	227 ROPERY ROAD GAINSBOROUGH.
Postcode:	DN21 2PD
Tel:	07833 197229.
E-mail:	di.43@hotmail.co.uk

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	MR VIPIN KUMAR VENUGOPAL
Address of Premises	324 ROPERY RD GAINSBOROUGH. DN21 2PD.
Application Details:	SUPPLY OF ALCOHOL (OFF THE PREMISES) MON - SUN 05.30 - 22.00

Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- The Prevention of Crime and Disorder
- Public Safety
- Prevention of Public Nuisance
- The Protection of Children from Harm



Details of representation.....

Concerns over the issues at current premises with regards to public nuisance and disorder.

Concerns over the increase in crime / Public nuisance ~~average~~ in the immediate + surrounding area.

attracting groups of people within a residential area

Busy road, Double yellow lines, bus lane, no parking - safety to road users at a busy junction.

Access for Emergency vehicles onto Ropery Rd.

TO CLOSE TO A PRIMARY SCHOOL

The selling of 'legal highs' & the public nuisance & crime this will encourage.

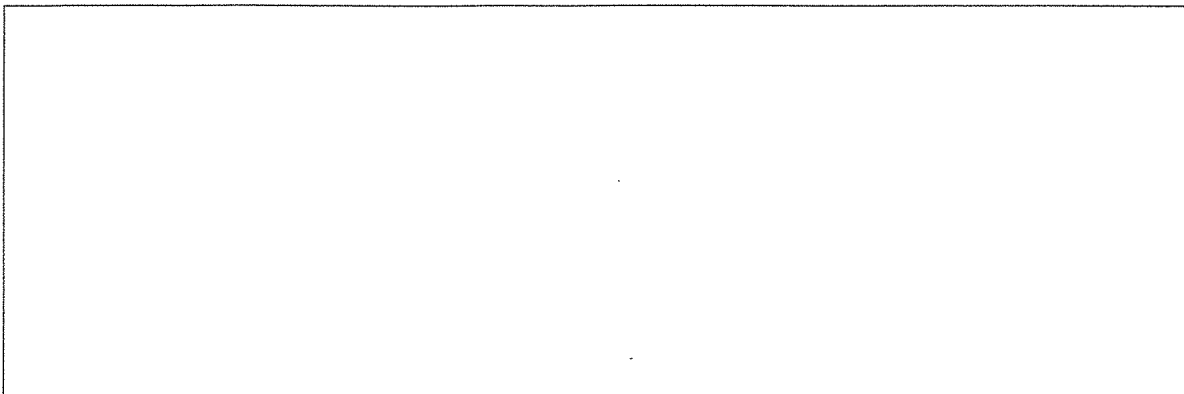
Noise.

If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives

No suggestions.

Not a suitable location as PJ within 100 yards of Co. Op down the road.

It will cause a public nuisance which will have implications for the residents of the local school.



Once the Licensing Team has received this form you will receive a written acknowledgment and you may be contacted to discuss the issue prior to any referral to a sub-committee hearing.

Please tick this box if you consent to any notice of any hearing being sent to you to the e-mail address provided by you above. (Please note if any notice is sent to you by electronic means, you will also receive confirmation of the same in writing).

Please tick this box if you do not intend to attend or be represented at any hearing.

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed: *Diane Lowe BEAN FRASER* Dated: *4th May 2017*
Print Name *Diane Lowe BEAN FRASER*

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk

Appendix 2c



Licensing Act 2003 Representation by Other Persons

Note: Please be aware that this form may be viewed by the Applicant or by a representative of the Applicant. It may also be read out in public at the sub-committee hearing.

Representations can be made against a relevant licence application by an interested party. Representations may be made on behalf of the above by a representative e.g. MP, solicitor, or a friend.

Representations are only relevant to an application if they relate to at least one of the four **Licensing Objectives** listed below:

1. **The Prevention of Crime and Disorder**
2. **Public Safety**
3. **Prevention of Public Nuisance**
4. **The Protection of Children from Harm**

Representations may be made at any time during a period of 28 consecutive days starting on the day after the application was given to the Licensing Authority.

In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please provide contact details of 'Other Persons'.

Name:	DON MIDDLETON
Address:	316 ROPERY ROAD GAINSBOROUGH
Postcode:	DN21 2PD
Tel:	07771 357001
E-mail:	middy04@gmail.com

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	MR. VIPIN KUMAR VENUGOPAL
Address of Premises	324 ROPERY RD. GAINSBOROUGH DN21 2PD
Application Details:	SUPPLY OF ALCOHOL (off the premises) MON - SUN 05-30 - 22-00

Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- The Prevention of Crime and Disorder
- Public Safety
- Prevention of Public Nuisance
- The Protection of Children from Harm

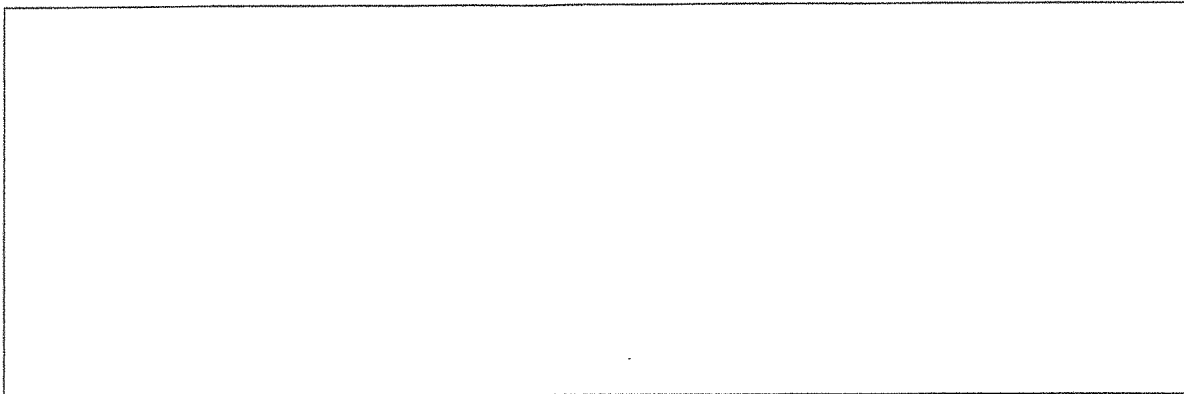


Details of representation.....

1. THE PROPOSED APPLICATION IS ON A MAJOR ARTERY INTO AND OUT OF THE TOWN, WITH NO SUITABLE PARKING CAUSING A DANGER TO PEDESTRIANS AND OTHER TRAFFIC.
2. THE PROPOSED APPLICATION IS IN THE IMMEDIATE VICINITY OF A LOCAL SCHOOL.
3. THERE ARE KNOWN ISSUES REGARDING PUBLIC NUISANCE AND ANTI SOCIAL BEHAVIOUR ISSUES AT HIS CURRENT PREMISES, QUESTIONING ADEQUATE SUPERVISION.
4. AS RESIDENTS WE HAVE CONCERNS OVER THE INCREASE IN BOTH CRIME AND PUBLIC ORDER INCIDENTS.
5. THERE IS SERIOUS CONCERN THAT THE APPLICANT OR THOSE KNOWN TO HIM ARE SELLING LEGAL HIGHS AT HIS CURRENT PREMISES.

I BELIEVE THAT MY LISTED OBJECTIONS SHOW CONTRAVENTION OF THE LISTED CRITERIA AND THEREFORE THAT THE APPLICATION SHOULD BE REJECTED.

If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives




Once the Licensing Team has received this form you will receive a written acknowledgment and you may be contacted to discuss the issue prior to any referral to a sub-committee hearing.

Please tick this box if you consent to any notice of any hearing being sent to you to the e-mail address provided by you above. (Please note if any notice is sent to you by electronic means, you will also receive confirmation of the same in writing).

Please tick this box if you do not intend to attend or be represented at any hearing.

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed:  Dated: 06-05-17
Print Name DON MIDDLETON

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk

Appendix 2d



Licensing Act 2003

Representation by Other Persons

Note: Please be aware that this form may be viewed by the Applicant or by a representative of the Applicant. It may also be read out in public at the sub-committee hearing.

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1. **The Prevention of Crime and Disorder**
2. **Public Safety**
3. **Prevention of Public Nuisance**
4. **The Protection of Children from Harm**

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In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please provide contact details of 'Other Persons'.

Name:	H. J. F. & J. M. CURTIS
Address:	221 ROPERY RD. GAINSBOROUGH.
Postcode:	DN21 2PD.
Tel:	01427/613194
E-mail:	.

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	MR. VIPIN KOMAR VENUGOPAL
Address of Premises	324 ROPERY RD. GAINSBOROUGH. DN9 9T 2RD
Application Details:	SUPPLY OF ALCOHOL (OFF PREMISES).

Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- **The Prevention of Crime and Disorder**
- **Public Safety**
- **Prevention of Public Nuisance**
- **The Protection of Children from Harm**

Details of representation.....

A large, empty rectangular box with a thin black border, intended for the user to provide input or suggestions.

If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives

A very large, empty rectangular box with a thin black border, occupying most of the lower half of the page, intended for the user to provide detailed suggestions or alterations.

Once the Licensing Team has received this form you will receive a written acknowledgment and you may be contacted to discuss the issue prior to any referral to a sub-committee hearing.

Please tick this box if you consent to any notice of any hearing being sent to you to the e-mail address provided by you above. (Please note if any notice is sent to you by electronic means, you will also receive confirmation of the same in writing).

Please tick this box if you do not intend to attend or be represented at any hearing.

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed: J. M. Curtis.....

Dated: 5/5/17.....

Print Name J. M. CURTIS.....

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk

Appendix 2e



Licensing Act 2003 Representation by Other Persons

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Please provide contact details of 'Other Persons'.

Name:	Miss Kerry Manson
Address:	1 Melrose Villas Melrose Road Gainsborough, Lincs DN21 2SB
Postcode:	DN21 2SB
Tel:	017920867207
E-mail:	Kerrym07@hotmail.com

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	Mr Vipin Kumar Venugopal
Address of Premises	324 Ropery Road Gainsborough DN21 2PD
Application Details:	Supply of alcohol (off the premises)

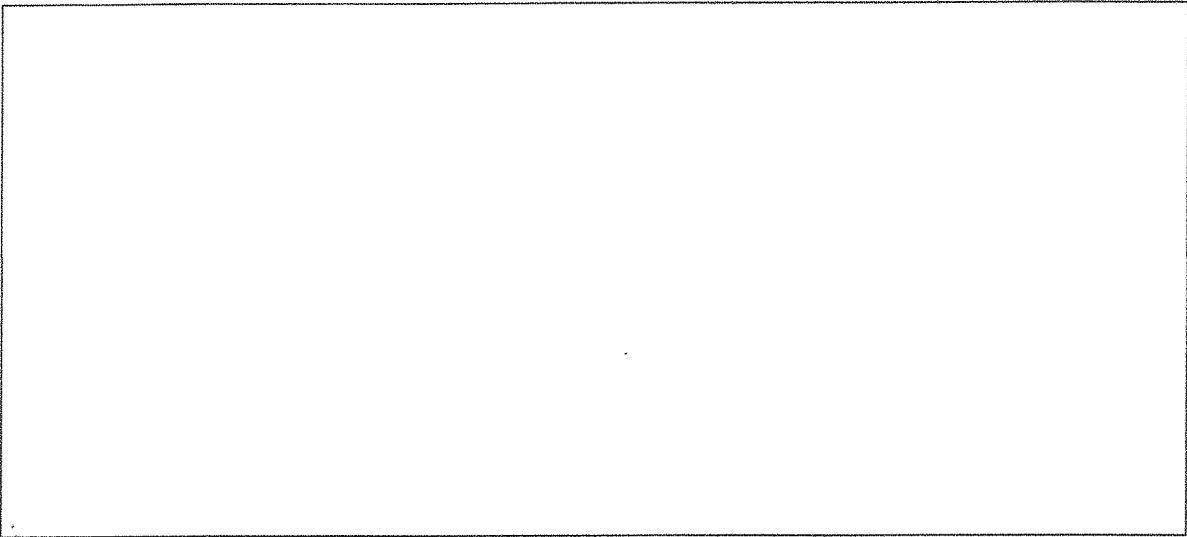
Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

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- Public Safety
- Prevention of Public Nuisance
- The Protection of Children from Harm

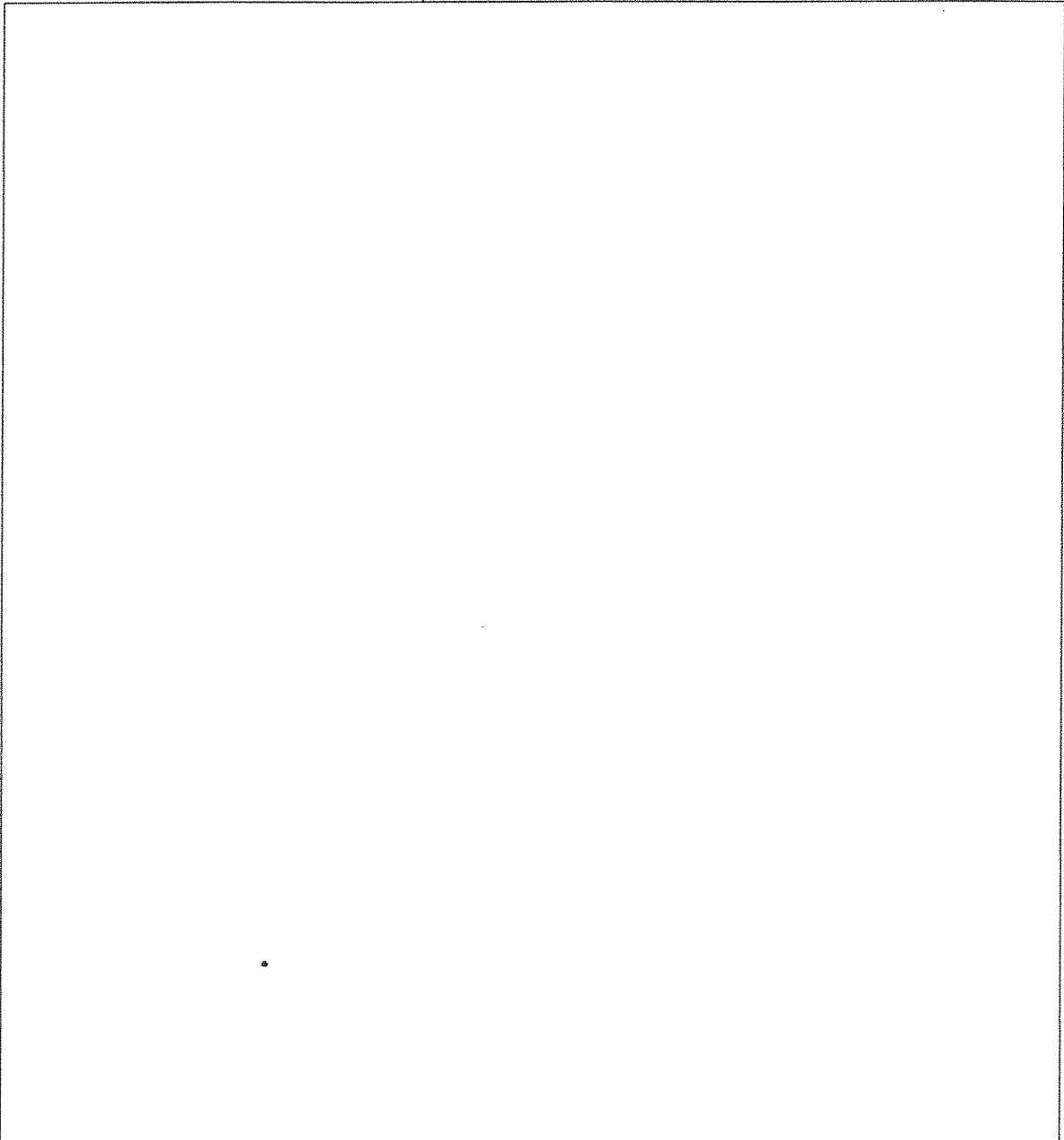


Details of representation.....

I feel that this would NOT be suitable to have in a residential area with a school across the road, there are already teenagers and younger children hanging about. I would be extremely concerned if the business were to be selling illegal highs, as a parent myself these would be real concerns. What example would this be setting having a primary school directly opposite and so many other children living in the area!



If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives



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If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed:k. Manson.....

Dated: ...8.5.17.....

Print Namek. Manson.....

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk

Appendix 2f



Licensing Act 2003 **Representation by Other Persons**

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In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please provide contact details of 'Other Persons'.

Name:	Mr A Ella
Address:	322 Repey Rd
Postcode:	DN21 2PD
Tel:	01427614517
E-mail:	.

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	MR VIPIN KUMAR VENUGOPAL
Address of Premises	324 ROPERY RD GAWMS DN21 2PD
Application Details:	SUPPLY OF ALCOHOL OFF PREMISES ^{MON-SUN} 05-30-22-00

Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- The Prevention of Crime and Disorder
- Public Safety
- Prevention of Public Nuisance
- The Protection of Children from Harm



Details of representation.....

Close to School

Residential area

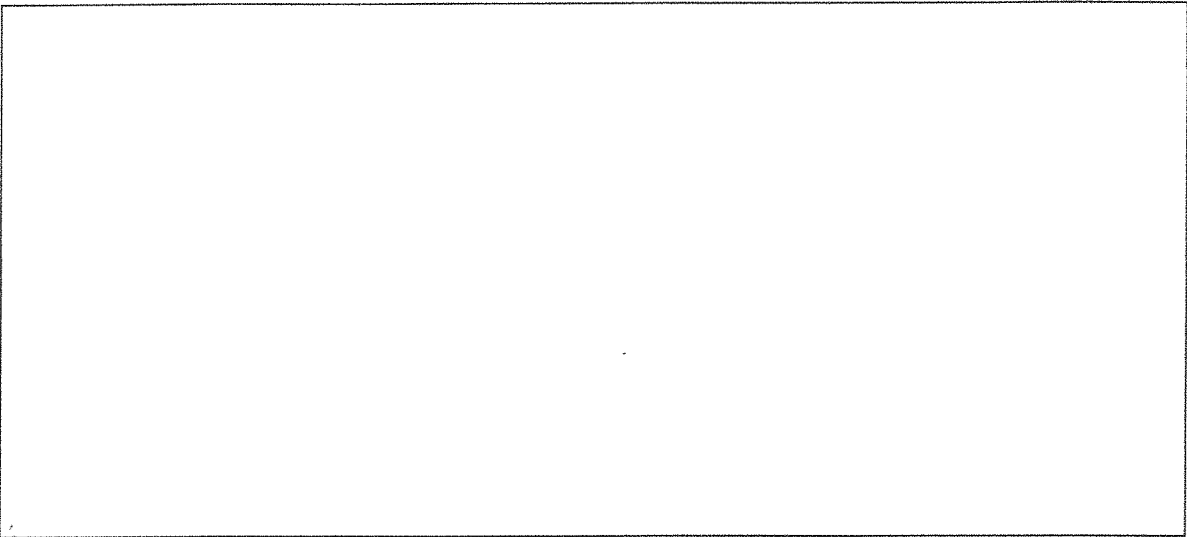
Will attract groups & cause nuisance and crime

Already get bottles & cans & takeaway rubbish thrown about

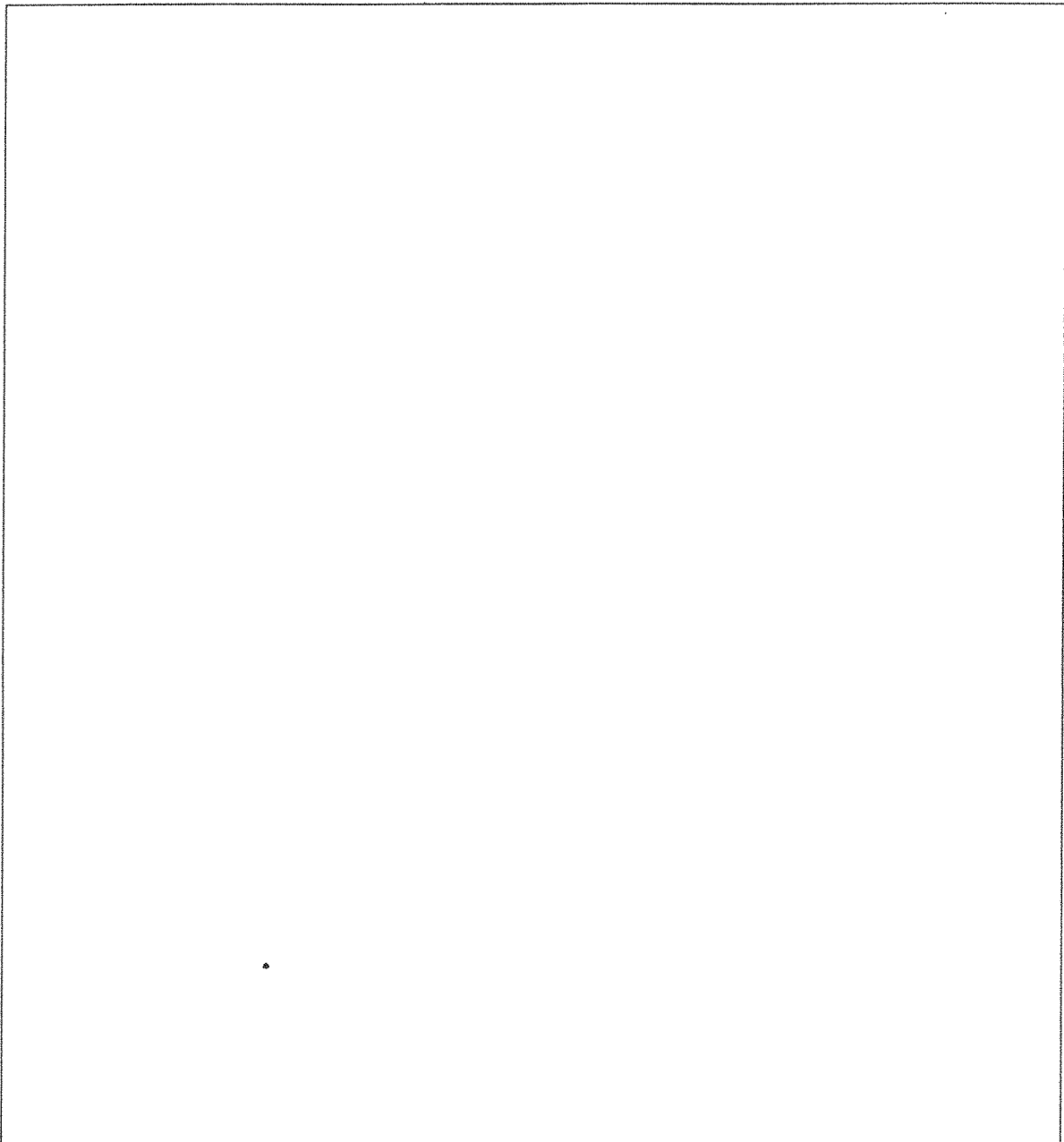
Price of property will go down

Busy road no parking

Worries over issues at current premises



If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives



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Please tick this box if you do not intend to attend or be represented at any hearing.

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed: A Ella

Dated: 6-5-2017

Print Name A ELLA

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk

Appendix 2g



Licensing Act 2003 Representation by Other Persons

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4. **The Protection of Children from Harm**

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In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please provide contact details of 'Other Persons'.

Name:	Mrs E GARNER
Address:	241 ROPERY ROAD
Postcode:	DN 21 2PD
Tel:	01427 615975
E-mail:	.

Please provide details of the application to which you wish to make a representation.

Name of Applicant:	MR VIPIN KUMAR VENUGOPAL
Address of Premises	324 ROPERY Rd DN21 2PD
Application Details:	SUPPLY OF ALCOHOL OFF THE PREMISES MON - SUN 05.30 - 22.00

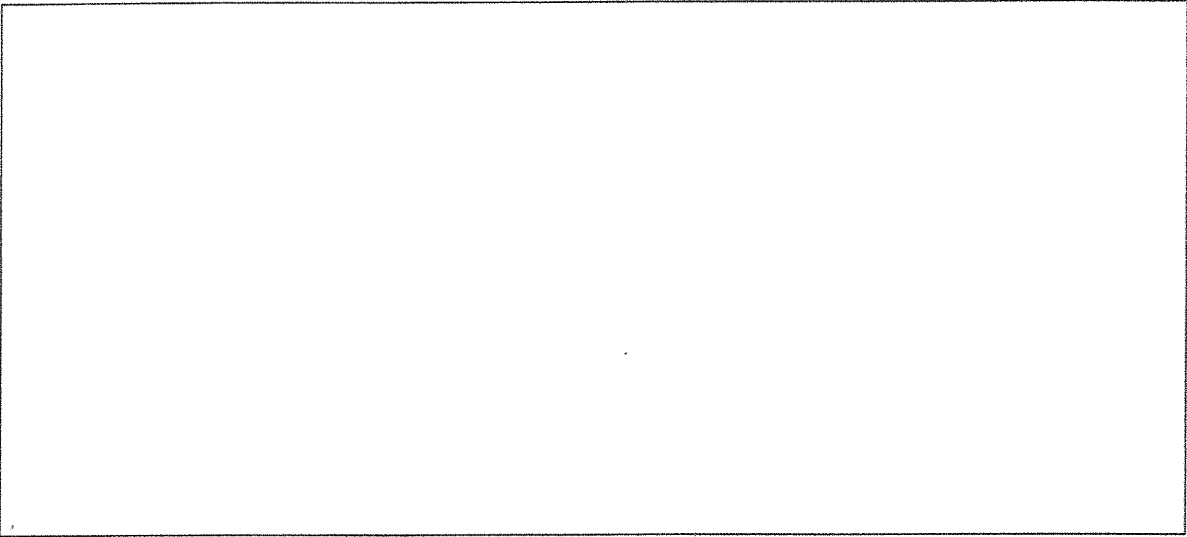
Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- The Prevention of Crime and Disorder
- Public Safety
- Prevention of Public Nuisance
- The Protection of Children from Harm

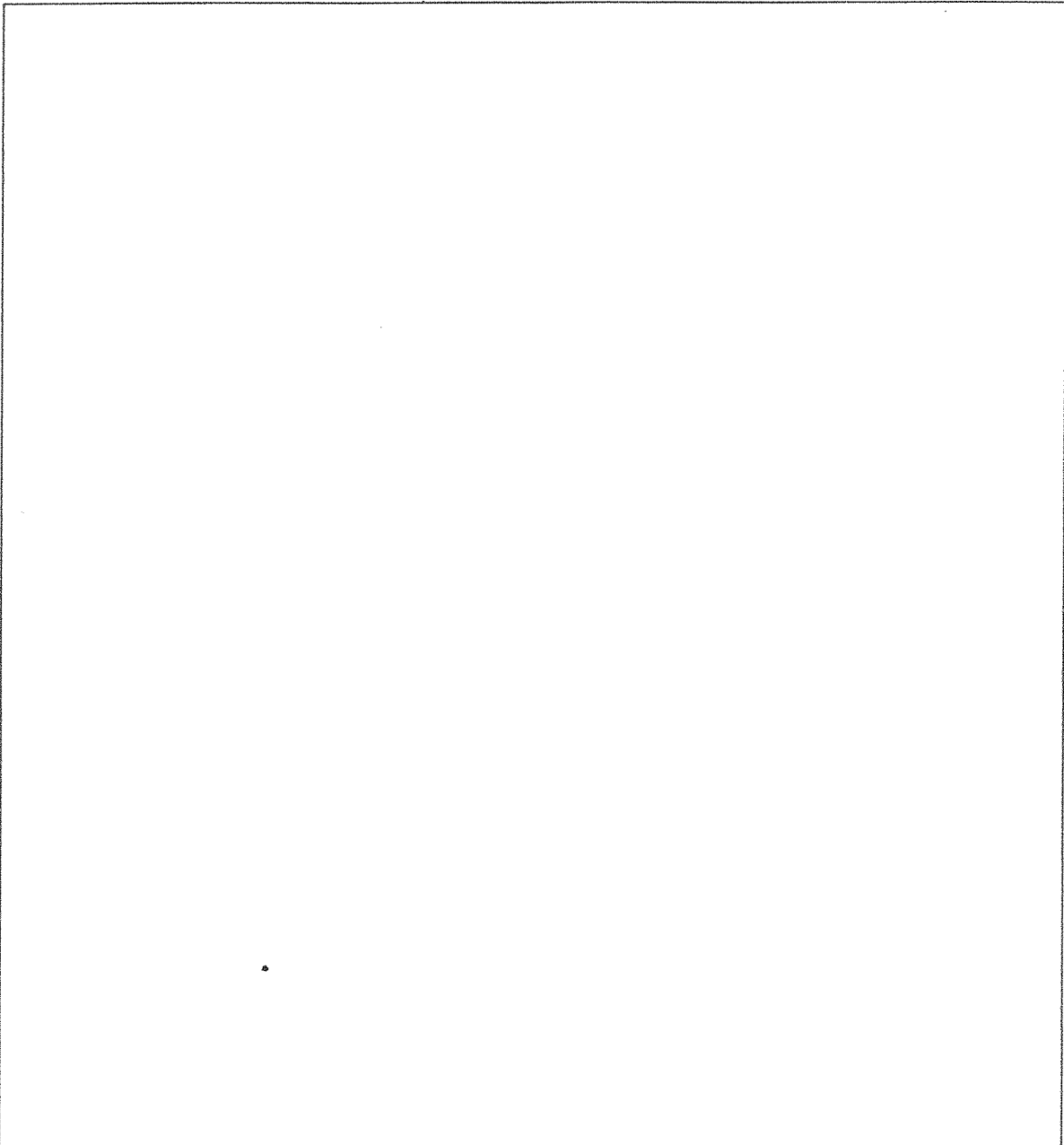


Details of representation.....

Busy Road - NO Parking
To Close to School and Pelican Crossings
Residential area.
I can see People Parking on the Bus Stop
and it yellow lines



If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives



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Please tick this box if you consent to any notice of any hearing being sent to you to the e-mail address provided by you above. (Please note if any notice is sent to you by electronic means, you will also receive confirmation of the same in writing).

Please tick this box if you do not intend to attend or be represented at any hearing.

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before any hearing, or otherwise orally at the hearing.

Signed: *E. Garner*.....

Dated: *6 May 2017*.....

Print Name *E. GARNER*.....

Please return this form to the following address:

**Licensing Team
West Lindsey District Council
Marshall's Yard
Gainsborough
Lincolnshire
DN21 2NA**

Email: licensing.2003@west-lindsey.gov.uk