Application for the review of a premises licence or club premises certificate under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

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

I P.C 1432 Chris Stevens on behalf of the Chief Officer of Police for

| (Insert name of applicant) apply for the review of a premises licent review of a club premises certificate und for the premises described in Part 1 below | der section 87 of the Licensing | |
|---|---------------------------------------|-------------------|
| Part 1 – Premises or club premises deta | iils | |
| Postal address of premises or, if none, of description The Crescent Off-Licence 179 Wellingborogh Road | ordnance survey map reference | POSTROOM/SCANNING |
| Post town Northampton | Post code (if known) NN1 4DY | RECEIVED |
| Number of premises licence or club pre PL0091 | mises certificate (if known | |
| | | |
| Part 2 - Applicant details I am | Please t | ick ves |
| 1) an interested party (please complete (A | | ion yes |
| a) a person living in the vicinity of the p | premises | |
| b) a body representing persons living in | n the vicinity of the premises | |
| c) a person involved in business in the | vicinity of the premises | |
| d) a body representing persons involve premises | ed in business in the vicinity of the | |

| 2) a responsible authority (please complete | e (C) below) |
|---|-------------------------------------|
| a member of the club to which this applic below) | cation relates (please complete (A) |
| (A) DETAILS OF INDIVIDUAL APPLICANT | T (fill in as applicable) |
| Please tick Mr | Other title (for example, Rev) |
| Surname | First names |
| | |
| I am 18 years old or over | Please tick yes |
| Current postal address if different from premises address | |
| Post town | Post Code |
| Daytime contact telephone number | |
| E-mail address (optional) | |
| (B) DETAILS OF OTHER APPLICANT | |
| Name and address | |
| | |
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| | |
| Telephone number (if any) | |
| E-mail address (optional) | |

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

| Name and address P.C 1432 Chris Stevens, Northamptonshire Police C/O The Guildhall St Giles Street Northampton NN1 1DE |
|---|
| Telephone number (if any) 101 ext 345730 |
| E-mail address (optional) Chris.Stevens@northants.pnn.police.uk |
| This application to review relates to the following licensing objective(s) Please tick one or more boxes 1) the prevention of crime and disorder 2) public safety 3) the prevention of public nuisance 4) the protection of children from harm |
| Please state the ground(s) for review (please read guidance note 1) On behalf of the Chief Officer of Northamptonshire Police Mr ADDERLEY, I call for Review of the Premises Licence under the Licensing Objective of the Prevention of Crime and Disorder and Public Safety. |
| The basis for this review is an incident which took place on the 19 th November 2018. At 22:06hrs Northamptonshire Police received a report from a member of the public that a large fight was occuring and that a metal pole was involved. Officers were deployed however by the time they had arrived the people involved had dispersed. |
| The initial investigation linked the incident to the Crescent Off-Licence and when Police arrived, they took one male to hopsital to have his injuries seen to. |
| At 23:03hrs more reports were received that 2 males had emerged from the Off-Licence and were seen to be throwing bottles of alcohol at people. When officers reattended, they have arrested three people linked to the premises and two other people on suspicion of affray. |
| Upon viewing the CCTV footage of the incident, it is apparent that the incident took place following a shoplifting by one of the people later involved. The Police believe |

The Police believe that as a result of the actions of the owner and his associates, numeous people were affected by the subsequent serious violence that took place and this significantly undermined the Licensing Objective stated above.

that the actions of the premises owner and his associates were completely disproportionate to the nature of the theft and certainly the value of it. The CCTV

footage shows the majority of the incident and the actions

| In order to prevent furt consider that the sub or revocation of the licent have to be confident this identified issues. | committee should con ce. In order to to impo | sider all option ose a lesser sa | s open to them nction, the sub | including a -committee |
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| (please read guidance note 2) |
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| In making this application, the Police intend to rely on the following: |
| 1) CCTV footage of the incident. 2) Photographs of the scene. 3) Body Worn Video footage from one of the arresting officers. |
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| | Please tick yes |
|--|---------------------------------|
| Have you made an application for review relating to | |
| If yes please state the date of that application | Day Month Year |
| If you have made representations before relating what they were and when you made them | g to this premises please state |
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| P | lease | tick | yes |
|---|-------|------|-----|
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- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate
- I understand that if I do not comply with the above requirements my application will be rejected

 \boxtimes

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO 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 3 - Signatures (please read guidance note 3)

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

| Signature | 1482 |
|-----------|--------------------------|
| Date 2 | 13/11/18 |
| Capacity | Police Licensing Officer |
| | |

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)

Post town

Telephone number (if any)

If you would prefer us to correspond with you using an e-mail address your e-

Notes for Guidance

mail address (optional)

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