



-7 JAN 2019

Representations on a Current Application for a Grant/Variation/Review of a Premises Licence or Club Premises Certificate under The Licensing Act 2003

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 (Insert name) Peter and Christine Lewis

.....wish to make representation in relation to an application that has been made in respect of the premises described in Part 1 below.

PART 1 – PREMISES OR CLUB PREMISES DETAILS

| | |
|--|------------------|
| Postal Address of Premises or Club Premises, or if none, ordnance survey map reference or description | |
| Elite Athlete Centre and Hotel, Loughborough University | |
| Post Town | Post Code |
| Loughborough | LE11 3TU |

| |
|---|
| Name of premises licence holder or club holding club premises certificate (if known) |
| Imago @ Loughborough Ltd |

| |
|--|
| Number of premises licence or club premise certificate (if known) |
| |

PART 2 – DETAILS OF PERSON MAKING REPRESENTATION

- Please Tick ✓
- 1) A responsible authority (please complete (C) below)
 - 2) A member of the club to which this representation relates (please complete (A) below)
 - 3) Other persons (Please complete (A) or (B) below)

(A) DETAILS OF INDIVIDUAL MAKING REPRESENTATION (fill in as applicable)

Mr Mrs Miss Ms Other Title (for example, Re)

Surname
Lewis

First Names
Peter & Christine

I am 18 years old or over Yes (Please Tick)

| | | | |
|-----------------|------------------|-----------|----------|
| Current Address | 7 Cotswold Close | | |
| Post Town | Loughborough | Post Code | LE11 3AN |

Daytime contact telephone number

E-mail address (optional)

(B) DETAILS OF OTHER PARTY MAKING REPRESENTATION (e.g Body or Business)

| |
|------------------|
| Name and Address |
|------------------|

| | |
|---------------------------|--|
| Telephone Number (If any) | |
| E-Mail address (optional) | |

(C) DETAILS OF RESPONSIBLE AUTHORITY MAKING REPRESENTATION

| |
|------------------|
| Name and Address |
|------------------|

| | |
|---------------------------|--|
| Telephone Number (If any) | |
| E-Mail address (optional) | |

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This representation relates to the following licensing objective(s)

Please
Tick ✓

- 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 representation (please read guidance note 1)

| |
|---|
| The Prevention of Crime and Disorder |
| Public Safety |
| The Prevention of Public Nuisance Please see details below. |
| The Protection of Children from Harm |

Please provide as much information as possible to support the representation

(Please read guidance note 2)

We live approximately 200 yards from the Elite Athlete Centre. Other residences in Cotswold Close and indeed on parts of New Ashby Road are even nearer. As such, we are unhappy at some of the aspects of this licensing application.

In particular the applications for Dance Performances out of doors each and every day of the week from 07:00 until midnight and the application for outdoor refreshment at virtually any time of the day or night seem quite excessive and incompatible with the University's claim to want to be regarded as "good neighbours".

The application is very vague in that no information is given about the source of any music (indoors or outdoors) and we feel that the licensing authorities should investigate this matter before even considering the application.

Local residents already suffer from intrusive University noise from the Student Union, the Athletics Stadium and the rugby pitch and we certainly have no wish to be on the receiving end of yet more disturbance.

We assume that musical events such as dance are likely to be infrequent but we do not feel that the University should be given the carte blanche that it appears to be seeking.

Please
Tick ✓

Have you made any representation relating to these premises before?

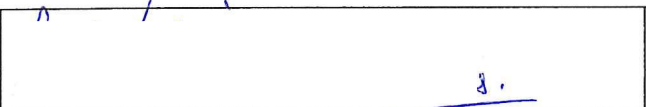
If Yes, please state the date of that representation

| Day | | Month | | Year | | | |
|-----|--|-------|--|------|--|--|--|
| | | | | | | | |

If you have made representation before relating to these premises please state what they were and when you made them.

Part 3 – Signatures (Please read guidance note 3)

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

| | | | |
|-----------|---|------|-----------------|
| Signature |  | Date | 3 January, 2019 |
| Capacity | Local residents | | |

Please Note – Your address will be a matter of public records if the application to which this representation relates is referred to the Licensing Committee to determine at a Hearing.

Contact name (where not previously given) and address for correspondence associated with this representation. (Please read guidance note 5)

Peter & Christine Lewis
7 Cotswold Close

Post Town Loughborough

Post Code LE11 3AN

Telephone Number (if any)

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E-mail Address (optional)

n

Notes for Guidance

1. The ground(s) for representation **must** be based on one or more of the licensing objectives.
2. Please list any additional information or details for example dates of problems, which are included in the grounds for representation, if applicable.
3. The representation form must be signed.
4. A representative's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
5. This is the address which we shall use to correspond with you about this representation.
6. For further information about the Licensing Act 2003 please contact: The Licensing Section, Charnwood Borough Council, Southfield Road, Loughborough, Leicestershire, LE11 2TX. Tel: 01509 634562 Email: Licensing@charnwood.gov.uk.