

Date Received
07.07.2020



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.....*Mr C Whyld*.....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 Quorn Grange Hotel, 88 Wood Lane, Quorn	
Post Town Quorn	Post Code LE12 8DB

Name of premises licence holder or club holding club premises certificate (if known) Not known
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Number of premises licence or club premise certificate (if known) Not known

PART 2 – DETAILS OF PERSON MAKING REPRESENTATION

- | | |
|--|----------------------------|
| | Please
Tick ✓ |
| 1) A responsible authority (please complete (C) below) | <input type="checkbox"/> |
| 2) A member of the club to which this representation relates (please complete (A) below) | <input type="checkbox"/> |
| 3) Other persons (Please complete (A) or (B) below) | X <input type="checkbox"/> |

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

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

Surname

First Names

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

Current Address	37 Unitt Road		
Post Town	Quorn	Post Code	LE12 8BX

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)	<input type="text"/>
E-Mail address (optional)	<input type="text"/>

(C) DETAILS OF RESPONSIBLE AUTHORITY MAKING REPRESENTATION

Name and Address

Telephone Number (If any)	<input type="text"/>
E-Mail address (optional)	<input type="text"/>

This representation relates to the following licensing objective(s)

Please
Tick ✓

- | | |
|--|----------------------------|
| 1. The Prevention of Crime and Disorder | <input type="checkbox"/> |
| 2. Public Safety | <input type="checkbox"/> |
| 3. The Prevention of Public Nuisance | X <input type="checkbox"/> |
| 4. The Protection of Children from Harm | <input type="checkbox"/> |

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 I believe that granting the licence will impact in the following ways: <ol style="list-style-type: none">1. Unwanted noise effecting children's sleep and the quiet enjoyment of our home2. Distress for farm animals3. Unwanted traffic volumes4. Unwanted footfall in a residential area The venue backs onto a quiet residential area (our street) and a farm (which backs on to our garden). My concern is that should the hotel hold outdoor music events, the volume will be a nuisance for residents, many of whom have young children or are elderly. There would also be potential noise nuisance which would be distressing for the farm animals. It's logical to assume that the hotel would be looking to attract non-residents to music or events. This would create an additional vehicle volume and footfall, especially late in the evening. This is a quiet area of the village and we chose to move here based on that reason. A licence for gigs somewhere in this close proximity, will I believe cause a public nuisance which I and my family would not welcome. Whilst I support the idea of a business looking to generate additional income, we didn't move our young family to the village for its nightlife or to hear live music in the evening from my garden. Therefore, I wish to object the application on the

grounds of public nuisance for the four stated reasons above.

The Protection of Children from Harm

Please provide as much information as possible to support the representation

(Please read guidance note 2)

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	30 06 20
Capacity			

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)	
Post Town	Post Code

Telephone Number (if any)	
E-mail Address (optional)	

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.