

### 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.

T Cyril Abadie
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(Insert name of applicant)

apply for the review of a premises licence under section 51 / apply for the review of a club premises certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below (delete as applicable)

Part 1 – Premises or club premises details

Postal address of premises or, if none, ordnance survey map reference or description The Chequered Flag Micropub 32 Borough Street				
Post code (if known)				
DE74 2LA				

Name of premises licence holder or club holding club premises certificate (if known) Mr Robert Anthony Sandham

Number of premises licence or club premises certificate (if known)

# Part 2 - Applicant details

I am		Please tick ✓ yes				
	1) an individual, body or business which is not a responsible authority (please read guidance note 1, and complete (A) or (B) below)					
2) a responsible authority (please complete (C)	below)	$\checkmark$				
3) a member of the club to which this application (please complete (A) below)	n relates					
(A) DETAILS OF INDIVIDUAL APPLICAN	<b>NT</b> (fill in as applic	able)				
Please tick ✓ yes						
Mr Mrs Miss	Ms	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
Telephone number (if any)
E-mail address (optional)

## (C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address
Fire Safety Inspecting Officer Cyril Abadie
Leicestershire Fire and Rescue Service Fire Protection Team
12 Geoff Monk Way
Birstall
LE4 3BU
Telephone number (if any)
0116 210 5696 / 0116 287 2241
E-mail address (optional)
cyril.abadie@lfrs.org

### This application to review relates to the following licensing objective(s)

1) the prevention	of crime	and disorder
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- 2) public safety
- 3) the prevention of public nuisance
- 4) the protection of children from harm

Please tick one or more boxes  $\checkmark$ 

**Please state the ground(s) for review** (please read guidance note 2) There is evidence to show that the premises in question is not supporting the following licensing objectives 2) Public Safety This is because: The Fire Authority was not able to ascertain if the Responsible Person. Mr Robert Anthony Sandham, is complying with his duties under the current fire safety legislation and namely, The Regulatory Reform (Fire Safety) Order 2005 - aka The FSO 2005-, to take 'general fire precautions' and hence, if the premises are safe from fire for all relevant persons. The meaning of 'general fire precautions' as defined under The FSO 2005 are as follow: (a) Measures to reduce the risk of fire on the premises and the risk of the spread of fire on the . (b) Measures in relation to the means of escape from the premises. (c) Measures for securing that, at all material times, the means of escape can be safely and effectively used. (d) Measures in relation to the means for firefighting on the premises (e) Mesures in relation to the means for detecting fire on the premises and giving warning in case of fire on the premises; and (f) Measures in relation to the arrangements for action to be taken in the event of a fire on the premises, including: (1) Measures relating to the instructions and training of employees; and (2) Measures to mitigate the effects of fire Please provide as much information as possible to support the application (please read guidance note 3) More specifically. The Responsible Person, Mr Robert Anthony Sandham, has: 1) failed to keep the communal rear alley way (which is a designated means of escape route) cleared of any combustible items and by obstructing it with large quantities of beer kegs barrels and refuse sacks. This in itself represents a Health & Safety hazards for all relevant people who may have to use the said route. This is also an offence under Article 14 of the current fire safety legislation, The FSO 2005, as people (guests and staff members) would not be able to quickly and safely evacuate in the event of a fire in the premises. failed TWICE to attend in person for Fire Safety Audits inspection visits arranged by the Fire Authority on 20/05/19 and 05/06/19 despite having been notified by emails and letters. failed to reply to any emails, letters, voicemails from the Fire Authority. 4) ignored to follow fire safety advice given to him by The Fire Authority (verbally on 05/06/18 and in writting on 06/06/18) and in order to remedy fire safety issues raised from fire safety concerns received from members of the public (e.g. blocked rear means of escape route by beer barrels kegs and refuse sacks). 5) failed to comply as a legal requirement under The FSO 2005, with an Article 27 Information Request Letter sent to him by The Fire Authority on 06/06/19 and thereby by his failure, considered as committing a criminal offence by Obstructing an inspector under Article 32(2)(d) of The FSO 2005 in the exercise or performance of his powers or duties. 6) Failed to provided when requested, all documentation consisting of: (i) Fire Risk Assessment (ii) Certification from competent persons showing the fire safety provisions that

may be present within the building (e.g. emergency lighting system, fire alarm system, fire extinguishers,..) are maintained in accordance with relevant guidance.
(iii) Maintenance records showing, where applicable, regular testing of the afore mentioned fire safety provisions (e.g. Fire Log Book).

(iv) Evidence of any staff training having been delivered (e.g. emergency procedures, fire extinguisher training,...)

Please tick ✓ yes

Have you made an application for review relating to the premises before

If	yes	please	state	the	date	of	that	application
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Day	Month	Year	

If you have made representations before relating to the premises please state what they were and when you made them

Please	tick	$\checkmark$	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

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.

**Part 3 – Signatures** (please read guidance note 4)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.** 

### Signature Cyril Abadie

.....

Date 24/06/19

.....

Capacity Fire Safety Inspecting Officer

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6)				
Post town	Post Code			
Telephone number (if any)				
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)				

#### Notes for Guidance

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