

**NORTH WEST LEICESTERSHIRE DISTRICT COUNCIL
LICENSING ACT 2003**

REPRESENTATION FORM

Your name/organisation name/name of body you represent	Ashby de la Zouch Town Council
Organisation name/name of body you represent (if appropriate)	
Your Postal address	Legion House, South Street, Ashby de la Zouch, Leicestershire, LE65 1BQ
Name of the premises you are making a representation about	VIP Rooms
Address of the premises you are making a representation about	North Street, Ashby de la Zouch

What are you making a representation about?
Please indicate which part of the licence/certificate application you are making a representation about (i.e. Terminal hours, and music and dancing on Friday and Saturday night)
Supply of alcohol Monday to Sunday 09:00 to 04:30hrs. Provision of LNR Monday to Sunday 23:00 to 05:00 hrs. Provision of regulated entertainment Monday to Sunday 09:00 to 05:00 hrs.

Your representation must relate to one of the four Licensing Objectives

Licensing Objective	<i>Please provide full details of your concerns regarding the application and include any evidence you may have in support of it. Please use separate sheets if necessary</i>
To prevent crime and disorder	
Public safety	
To prevent public nuisance	Concerns for the residents who live on North Street, as people will be remaining in the town centre until later. Noise from the venue's entertainment will continue until 5am, as opposed to 2:30am, this is considered unacceptable for neighbouring residents. Within the 2013 Licensing Survey conducted by Ashby de la Zouch Town Council 39% of respondents felt the change in opening hours from 3am to 2:30am was beneficial to the town. As this had led to less noise and disruption.
To protect children from harm	

Please suggest any conditions that could be added to the licence to remedy your representation or other suggestions you would like the Licensing Sub Committee to take into account.	
---	--

Signed: Karen Edwards
Capacity: Deputy Town Clerk

Date: 22nd March 2016

NOT FOR PUBLICATION

Your e-mail address	karenedwards@ashbytowncouncil.org.uk
Your contact telephone number	01530 416961

SUPPORTING NOTES

If you do make a representation you will be invited to attend a meeting of the Licensing sub Committee and any subsequent appeal proceeding. If you do not attend, the Committee will consider any representations that you have made.

This form must be returned within the Statutory Period, which is 28 days from the date the notice was displayed on the premises or the date specified in the Public Notice in the newspaper. Please contact the Licensing Section on 01530 454556 if you are in doubt about the date.

They can only relate to the four licensing objectives.

Your representation will be passed to the applicant, to allow them the opportunity of addressing your concerns. Your representations will be published in the report available to the Licensing Sub-Committee, which will be publicly available. Names and addresses will only be withheld from the Sub-Committee report at your request. Email addresses and contact telephone numbers will not be publicly available.

Please return this form when completed along with any additional sheets to:

Legal and Support Services
Licensing
North West Leicestershire District Council
Council Offices
Coalville
Leicestershire
LE67 3FJ

email to licensing@nwleicestershire.gov.uk

Tel: 01530 454545
Fax: 01530 454574