



## 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)

Licensing Authority

Wish to make representation about the application for variation/grant for a premises licence/club premises certificate (delete as applicable)

### PART 1 – PREMISES OR CLUB PREMISES DETAILS

**Postal Address of Premises or Club Premises, or if none, ordnance survey map reference or description**

Your Local Stores  
311 – 313 High Street

**Post Town** Gateshead

**Post Code** NE8 1EQ

**Name of premises licence holder or club holding club premises certificate (if known)**

Sajaad ALI

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

Not Currently Licensed

### PART 2 – DETAILS OF PERSON MAKING REPRESENTATION

- |  | Please<br>Tick ✓                    |
|--|-------------------------------------|
| 1) A responsible authority (please complete (C) below)                                   | <input checked="" 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)                                      | <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	<input type="text"/>		
Post Town	<input type="text"/>	Post Code	<input type="text"/>

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 Tracey Johnson Assistant Manager – Trading Standards & Licensing Economy Innovation & Growth Civic Centre Regent Street Gateshead NE8 1HH
---

Telephone Number (If any)	0191 4333934/07925 306840
E-Mail address (optional)	<a href="mailto:traceyjohanson@gateshead.gov.uk">traceyjohanson@gateshead.gov.uk</a>

This representation relates to the following licensing objective(s)

Please  
Tick ✓

- |    |   |   |
|----|---|---|
| 1. | <b>The Prevention of Crime and Disorder</b> | ✓ |
| 2. | <b>Public Safety</b>                        | ✓ |
| 3. | <b>The Prevention of Public Nuisance</b>    | ✓ |
| 4. | <b>The Protection of Children From Harm</b> | ✓ |

**Please state the ground(s) for representation** (please read guidance note 1)

I have huge concerns over the operating style of the business especially in relation to the late offer of delivery of alcohol until 03:00 without having had any response from the applicant to questions submitted to them prior to writing the representation.

I do not believe that Sajaad ALI is a responsible person able to manage the premises with an alcohol licence without undermining all 4 of the licence objectives.

**Please provide as much information as possible to support the representation**

(Please read guidance note 2)

The premises have previously held a licence to sell alcohol in the name of Sajaad ALI. While the licence was held, underage sales occurred from the premises including selling a bottle of Bulmers Cider to a 14 year old child volunteer on 27 November 2014. There were failings in the management of the premises at that time. The refusals register was not used and maintained. Visits were made to the premises to check the company's challenge 25 policy and on several occasions, the volunteers were sold alcohol without requiring them to produce identification to prove their age. This information as well as the underage sale was put before committee on 7<sup>th</sup> April 2015 which resulted in the premises licence being revoked.

I have asked questions in relation to the following of which I have not had any response.

- There's nothing contained in the application to enable me to determine what time delay there will be in between an order and the delivery of alcohol taking place. Please can you clarify this for me?
- Who will be carrying out the deliveries?
- Who is responsible for carrying out the training with the delivery drivers?
- How many staff will be employed to do the deliveries?
- What is the reasoning for delivery only after 23:00 – 03:00?
- How many staff are to be employed at the premises?

As I have not received any response to these questions and I have grave concerns of the management ability of Sajaad ALI, I would like to object to the application on that basis that I do not believe there will be sufficient management control of the alcohol sales from this premises.

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 this premises please state what they were and when you made them.

### **How We Collect And Use Information**

The information collected, on this form and from supporting evidence, by Gateshead Council will be used to process your application. The information may be passed to other Enforcement Agencies as permitted by law.

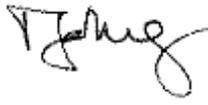
We may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information from certain third parties, or give information to them to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, as permitted by law. These third parties include Government Departments and local authorities.

We will not disclose information about you to anyone outside Gateshead Council nor use information about you for other purposes unless the law permits us to.

Gateshead Council is the Data Controller for the purposes of the Data Protection Act 1998. If you want to know more about what information we have about you, or the way we use your information, you can ask at Civic Centre, Regent Street, Gateshead, NE8 1HH

**Part 3 – Signatures** (Please read guidance note 3)

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

Signature		Date	30/07/20
Capacity	Assistant manager – Trading Standards & Licensing		

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 Act Section, Development & Public Protection, Civic Centre, Regent Street, Gateshead Tyne and Wear NE8 1HH  
Tel: 0191 433 3918 or 0191 433 3178