



SOUTH DERBYSHIRE DISTRICT COUNCIL

Licensing Act 2003

Representation by an 'Other Person' as defined by the Act

Note: Please be aware that this form may be viewed by the Applicant or by a representative of the Applicant. It may also be read out in public at the sub-committee hearing.

You may request that the Licensing Authority withholds some or all of your details, however, the withholding of details will only be considered in exceptional circumstances where the Licensing Authority believes there to be a genuine and well-founded fear of intimidation. Any person who wishes the Licensing Authority to consider withholding their details is advised to contact the Licensing Department prior to submitting this form.

Your personal details will be redacted in the Licensing and Appeals Sub-Committee report.

An 'other person' can make representations against a relevant licence application. Representations may be made on behalf of the above by a representative e.g. MP, solicitor, or a friend.

Please indicate in which capacity you are making this representation by ticking a box below:

	An individual person		
•	A body representing a person e.g. Solicitor		
	A person involved in a business		
œ	A body representing a business		

Representations are only relevant to an application if they relate to at least one of the four Licensing Objectives listed below:

- 1. The Prevention of Crime and Disorder
- 2. Public Safety
- 3. Prevention of Public Nuisance
- 4. The Protection of Children from Harm

Representations may be made at any time during a period of 28 consecutive days starting on the day after the application was given to the Licensing Authority. This period is reduced to 10 workings days for minor variations applications.

In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Licensing. Authority by the Magistrates Court, starting on the day after the day the notice was received.

Please enter your contact details below: -

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Name:

Address:			
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Postcode:			
Tel:			
E-mail:			
affected, if diffe	the name and address erent from the address g out you do not live at the	iven above i.e. this	
Name:			
Address:			-11-11-11-11-11-11-11-11-11-11-11-11-11
Postcode:			

Address of premises in application causing concern, which you wish to make a representation about

Name of Applicant:	cripps Barn Group Itd
Address of Premises	Grangefields farm, DE65BU
Application Details:	New premises heen ce.

Please give details of your representation and evidence supporting your representation in the box below. Indicate which of the licensing objectives your representation refers to by ticking the relevant box/es:

C	The Prevention of Crime and Disorder	V
9	Public Safety	\square
(Prevention of Public Nuisance	V
•	The Protection of Children from Harm	

Details of representation (please use additional sheets where necessary) The location of grangefield form is very wrat with only small rural communities and until single track Lones for access. Allowing a late right alcohol licence that well be from 11:00 to 01:00 will only encourage high levels of children which in burn will course on a social isensition, noise ruisance and effect the public safety of local residents from 11:00 onwords. A wedding whose with a late night alcohol licence and offering ofter closure the opportunity to buy alcohol to take away of site is completely alt of character for the location with no way of monitoring once the site has been vacated. Sadly the results of alcohol and driving are thoun to Local people when deaths and sonous hypry hout already occurred not for from the proposed venue. sode shald reject the application and insist that the owners look for amone suitable site in their

antations to operate a wedding venue

Alterative is be reject application.													
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Once the Licensing Section has received this form you will receive a written acknowledgement. Your representation will be forwarded to the applicant and/or their representative who may contact you in order to discuss your representations.

This form must be received by the Licensing Authority within the statutory representation period.

Signed:	,
PRINT NAME:.	FIGNA DIOCS
Date:	10 October 2018

Please return this form to the following address:

South Derbyshire District Council
Licensing Section
Civic Offices
Civic Way
SWADLINCOTE
DE11 0AH

Or by email licensing@south-derbys.gov.uk