

# **LICENSING ACT SUB-COMMITTEE AGENDA**



**Tuesday 11<sup>th</sup> October 2005**

**At 10am**

**in Committee Room B**

**MEMBERS: LICENSING ACT SUB-COMMITTEE:**

Councillors Cambridge, Cook and Rayner

- 1. APOLOGIES FOR ABSENCE**
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
- 3. ITEMS FOR DECISION**
  - 3.1 Italiano's (*Head of Public Protection and Housing*)

## **Licensing Act 2003**

### **Procedure for Hearings**

Prior to the commencement of the meeting, a representative of the Democratic Services Section shall establish the identity of those present, who they represent and who intends, or wishes to speak.

1. The Chair's opening comments, including introduction of Members of sub-committee and officers present. Explanation of the decision to be considered.
2. Head of Public Protection and Housing outlines the application, any relevant representations and relevancy to Licensing Policy and statutory guidance.
3. Members ask any questions of the Head of Public Protection and Housing
4. Applicant presents their case (either personally or via legal representation) and introduces witnesses where appropriate.
5. Questions by Members to applicant and/or applicant's witnesses.
6. Representations by responsible bodies and/or interested parties and witnesses introduced where appropriate.
7. Questions by Members to responsible bodies/interested parties and/or their witnesses
8. Parties may question and clarify issues raised with the consent of the Chair.
9. If required, responsible bodies/interested parties be given opportunity to sum up
10. If required, the applicant to be given opportunity to sum up.
11. Members to have the opportunity to clarify any points raised. The Chair shall ask whether all parties are satisfied they have said all they wish to.
12. Members to go into closed session to deliberate
13. Chair informs parties of their decision, with reasons.

**Report of:** Head of Public Protection and Housing

**Subject:** APPLICATION FOR A NEW PREMISES LICENCE  
FOR ITALIANOS TAKE-AWAY RESTAURANT

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## 1. PURPOSE OF REPORT

- 1.1 To consider an application for a new Premises Licence in respect of Italiano's Takeaway Restaurant, Park Road, Hartlepool.

## 2. BACKGROUND

- 2.1 Applicant: MR Zabi Sarwary  
Premises: Italiano's  
Park Road  
Hartlepool  
TS24 7PW

- 2.2 This application is for a new Premises Licence as the activities to which this application refers were not previously licensable and no other licences are currently in force.

## 3. SUMMARY OF APPLICATION

- 3.1 The applicant has applied for a new Premises Licence for the following activities: -

1. Late Night Refreshment	Mon – Thu	1200 – 0000
	Fri – Sat	1200 – 0300
	Sunday	1200 – 0100

- 3.2 A copy of the application is attached as Appendix I.
- 3.3 The application has been advertised in the prescribed manner and one representation has been received from **Cleveland Police** (Appendix II).
- 3.4 The representation from Cleveland Police expresses concerns that an application for a 3:00 a.m. licence for premises situated in an area where there is a large concentration of licensed premises, may lead to a cumulative negative impact on the crime and disorder and public nuisance licensing objectives.
- 3.5 Although not a relevant representation, Hartlepool Borough Council's **Planning Department** have indicated that the premises have an hours

restriction to be open no later than 2330 Monday to Saturday and 2300 on Sundays.

#### **4. ISSUES**

- 4.1 As relevant representations have been received within the prescribed time period, a hearing must be held for Members to consider those representations (unless all parties agree a hearing is unnecessary).
- 4.2 Members are also advised that the applicant's premises are situated within Hartlepool's 'Special Policy' area.
- 4.3 The Special Policy forms part of Hartlepool's Licensing Policy and states that, because of the number of licensed premises in the specified area, there is a potential impact on the promotion of the four licensing objectives.
- 4.4 The existence of a Special Policy creates a rebuttable presumption that applications for new premises licences, or material variations, will normally be refused, unless it can be demonstrated that the operation of the premises will not add to the cumulative impact being experienced.
- 4.5 The Planning Department has indicated there is a planning condition for the premises that it shall only operate until 2330 between Monday and Saturday and 2300 on Sundays.
- 4.6 Hartlepool Borough Council's Licensing Policy states that premises 'must have suitable, appropriate authorised use under planning legislation' and that 'The Licensing Authority will not normally entertain an application for a licence unless the applicant can demonstrate that the premises have an appropriate planning consent.'
- 4.7 Statutory guidance issued by the Secretary of State under section 182 of the Licensing Act states that 'applications for premises licences for permanent commercial premises should normally be from businesses with planning consent for the property concerned'.
- 4.8 As the Licensing Act 2003 defines late night refreshment as the provision of hot food after 11:00 p.m. Members may not impose any conditions, or hours restrictions that would have effect prior to this time.
- 4.9 No complaints have been received by the Public Protection and Housing Division regarding noise emanating from the premises.
- 4.10 The licensing objectives are: -
  - a) the prevention of crime and disorder;
  - b) public safety;
  - c) the prevention of public nuisance; and
  - d) the protection of children from harm

- 4.11 Having regard to the representations received, Members may take any of the following steps for the promotion of the licensing objectives.
- 1) Grant the application without amendment
  - 2) Grant the application with conditions, or amended conditions
  - 3) Reject the application in full, or in part
- 4.12 Members are reminded that they must only consider those aspects of the licence application that are relevant to the representations received.

## **5. RECOMMENDATIONS**

- 5.1 That Members consider the representations made by the applicant and interested parties and determine whether the licence should be granted and, if appropriate, what conditions, if any, should be attached.

## Appendix 1

Hartlepool Borough Council, Civic Centre, Victoria Road, Hartlepool, TS24 8AY

**APPLICATION FOR A PREMISES LICENCE TO BE GRANTED  
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 or typed in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

I/We.....apply for as premises licence under section 17 of

(insert name(s) of applicant)

the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

**Part 1 - Premises details**

Postal address of premises or, if none, ordnance survey map reference or description

Italiano's  
29, Park Road.

Post Town

HARTLEPOOL

Post Code

TS24 - 7PW.

Telephone number at premises (if any)

222666.

Non-domestic rateable value of premises

Rateable  
value  
£5,400.

£2,278.80p

**Part - 2 Applicant details**

Please state whether you are applying for a premises licence as

Please tick ✓ yes

- |   |                                     |                             |
|---|-------------------------------------|-----------------------------|
| a) An individual or individuals *               | <input checked="" type="checkbox"/> | Please complete section (A) |
| b) A person other than an individual *          | <input type="checkbox"/>            |                             |
| i. as a limited company                         | <input type="checkbox"/>            | Please complete section (B) |
| ii. as a partnership.                           | <input type="checkbox"/>            | Please complete section (B) |
| iii. as an unincorporated association or        | <input type="checkbox"/>            | Please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/>            | Please complete section (B) |
| c) a recognised club                            | <input type="checkbox"/>            | Please complete section (B) |
| d) a charity                                    | <input type="checkbox"/>            | Please complete section (B) |

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- e) the proprietor of an educational establishment ☐ please complete section (B)
- f) a health service body ☐ please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

\*If you are applying as a person described in (a) or (b) please confirm:

Please tick ☒ yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or ☒
- I am making the application pursuant to a
  - statutory function or ☐
  - a function discharged by virtue of Her Majesty's prerogative ☐

**(A) INDIVIDUAL APPLICANTS (fill in as applicable)**

Mr ☒ Mrs ☐ Miss ☐ Ms ☐ Other title (for example, Rev) ☐

Surname SARVARY First names ZABI

Please tick ☒ yes

I am 18 years old or over ☒

Current postal address if different from premises address

SAME

Post Town

Postcode

Daytime contact telephone number

222666

E-mail address (optional)

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other title (for example, Rev) ☐

Surname  First names

Please tick  
☒ yes

I am 18 years old or over ☐

Current postal  
 address  
 if different from  
 premises address

Post Town

Postcode

Daytime contact telephone number

E-mail address  
 (optional)

**(B) OTHER APPLICANTS.**

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned

Name
Address
Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc)
Telephone number (if any)
E-mail address (optional)



**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
01	11	2005

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day	Month	Year

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

N/A

Please give a general description of the premises (please read guidance note 1)

My Premises are a small pizza shop, next door is a cafe.

The shop is at the bottom of Park Road, opposite the town centre.

We just sell hot + cold food.

What licensable activities do you intend to carry on from the premises?  
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please tick ✓ yes

**Provision of regulated entertainment**

- |  |                          |
|--|--------------------------|
| a) plays (if ticking yes, fill in box A)   | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B)   | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C)  | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D)   | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E)  | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F)  | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G)   | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g)<br>(if ticking yes, fill in box H) | <input type="checkbox"/> |

**Provision of entertainment facilities for:**

- |  |                          |
|--|--------------------------|
| i) making music (if ticking yes, fill in box I)  | <input type="checkbox"/> |
| j) dancing (if ticking yes, fill in box J)   | <input type="checkbox"/> |
| k) entertainment of a similar description to that falling within (i) or (j)<br>(if ticking yes, fill in box K) | <input type="checkbox"/> |

**Provision of late night refreshment** (if ticking yes, fill in box L)

☒

**Supply of alcohol** (if ticking yes, fill in box M)

☐

In all cases complete boxes N, O and P



**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> <input type="checkbox"/> (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed					
Thur			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Fri					
Sat					
Sun			<b>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> <input type="checkbox"/> (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed					
Thur			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Fri					
Sat					
Sun			<b>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			State any seasonal variations for indoor sporting events (please read guidance note 4)
Fri			
Sat			
Sun			
			Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 5)

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick [Y](please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed					
Thur			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)		
Fri					
Sat					
Sun					
			Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)		

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here (please read guidance note 3)</b>	Both	
Tue					
Wed					
Thur			<b>State any seasonal variations for the performance of live music (please read guidance note 4)</b>		
Fri					
Sat					
Sun			<b>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 5)</b>		

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here (please read guidance note 3)</b>	Both	
Tue					
Wed					
Thur			<b>State any seasonal variations for playing recorded music (please read guidance note 4)</b>		
Fri					
Sat					
Sun			<b>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</b>		

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</u>	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here (please read guidance note 3)</u>		
Mon					
Tue			<u>State any seasonal variations for the performance of dance (please read guidance note 4)</u>		
Wed					
Thur			<u>Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</u>		
Fri					
Sat					
Sun					

**H**

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment you will be providing</u>		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</u>	Indoor	
Mon				Outdoor	
				Both	
Tue			<u>Please give further details here (please read guidance note 3)</u>		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</u>		
Fri					

Sat			<b>Non standard timings. Where you intend to use the premises for the entertainment of similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</b> (please read guidance note 5)
Sun			

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the facilities for making music you will be providing</b>	
			<b>Will the facilities for making music be indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	
			Indoors	
			Outdoors	
			Both	
Day	Start	Finish		
Mon			<b>Please give further details here</b> (please read guidance note 3)	
Tue				
Wed				
Thur			<b>State any seasonal variations for the provision of facilities for making music</b> (please read guidance note 4)	
Fri				
Sat				
Sun			<b>Non standard timings. Where you intend to use the premises for provision of facilities for making music entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)	

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick [Y] (see guidance note 2)</b>	
			Indoors	
			Outdoors	
			Both	
Day	Start	Finish		
			<b>Please give a description of the facilities for dancing you will be providing</b>	

Mon			Please give further details here (please read guidance note 3)
Tue			
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)
Thur			
Fri			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment facility you will be providing</b>	
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoor
				Outdoor
Mon				Both
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thur			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within j or k (please read guidance note 4)	
Fri				
Sat			Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list (please read guidance note 5)	
Sun				



L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both		
Mon	12.00	00.00	Please give further details here (please read guidance note 3)		
Tue	12.00	00.00			
Wed	12.00	00.00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur	12.00	00.00			
Fri	12.00	03.00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 5)		
Sat	12.00	03.00			
Sun	12.00	01.00			

M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption (Please tick box Y) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
Day	Start	Finish	Both		
Mon			State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Tue					
Wed			Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5)		
Thur					
Fri					
Sat					

Sun			
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**State the name and details of the individual whom you wish to specify on the licence as premises supervisor**

Name.....

Address.....

Postcode.....

Personal Licence number(if known) .....

Issuing licensing authority (if known).....

N

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)

NONE

O

Hours premises are open to the public Standard timings (please read guidance note 6)			State any seasonal variation (please read guidance note 4)
Day	Start	Finish	
Mon	12.00	01.00	<p><b>Non standard timings. Where you intend to use the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)</b></p>
Tue	12.00	01.00	
Wed	12.00	01.00	
Thur	12.00	01.00	
Fri	12.00	03.00	
Sat	12.00	03.00	
Sun	12.00	01.00	

**P**

Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

b) The prevention of crime and disorder

c) Public safety

d) The prevention of public nuisance

ME OR A MEMBER OF MY STAFF  
WILL CHECK FOR RUBBISH LEFT  
OUTSIDE THE SHOP.

e) The protection of children from harm

CHECKLIST:-

Please tick ✓ yes

- I have made or enclosed payment of the fee ☒
- I have enclosed the plan of the premises ☒
- I have sent copies of this application and the plan to responsible authorities and others where applicable ☒
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable ☐
- I understand that I must now advertise my application ☒
- I understand that if I do not comply with the above requirements my application will be rejected ☒

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 – Signatures** (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent. (See guidance note 11) If signing on behalf of the applicant please state in what capacity.

Signature

Date

Capacity

For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent. (please read guidance note 12) If signing on behalf of the applicant please state in what capacity.

Signature

Date

Capacity

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

Post town

Post code

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

**Notes for Guidance**

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day, e.g. Christmas Eve. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

**Copies of this completed application form must be sent to:-**

The Licensing Team (HBC),  
 Principal Trading Standards Officer (HBC)  
 Development Control Manager (HBC)  
 Principal Environmental Health Officer (Commercial Services) (HBC)  
 Principal Environmental Health Officer (Environmental Protection) (HBC)  
 Head of Safeguarding and Review (Licensing) (HBC)  
 Cleveland Police,  
 Cleveland Fire Brigade

Addresses for the above organisations are detailed in the guidance notes that accompanied this document or can be obtained from the Licensing team on request.

**The Licensing Section  
 Public Protection and Housing  
 Hartlepool Borough Council  
 Civic Centre  
 Victoria Road  
 Hartlepool  
 TS24 8AY**

PREM01

Appendix 2



"REEVE, Katherine"  
<Katherine.Reeve@cleveland.pnn.police.uk>

25/08/2005 10:21

To: <licensing@hartlepool.gov.uk>

cc: "HANSON, Paul" <Paul.Hanson@cleveland.pnn.police.uk>

Subject: Representations - Italiano's Takeaway

Please find attached a copy of a letter in relation to the above premises which has been sent to the applicant. I would be grateful if you could accept this as police representations in relation to this premises.

Please do not hesitate to contact Marie Nevison or myself if you have any queries.

Regards,

Katherine Reeve  
Legal Assistant  
01642 301305

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This email has been scanned by the MessageLabs Email Security System.  
For more information please visit <http://www.messagelabs.com/email>

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Representations - Italiano's Takeaway.doc

Your Ref:  
Our Ref: MN/KR

When telephoning please use  
Direct Line (301231) to contact  
Mrs M Nevison

25<sup>th</sup> August, 2005

Dear Mr. Sarwary,

**Re: Licensing Act 2003**  
**Italiano's Takeaway, Park Road, Hartlepool**

I refer to your recent application.

It is for the applicant to demonstrate how they will ensure that the licensing objectives are not undermined since the premises is situated in the Local Authority Special Policy area in Hartlepool. Cleveland Police are concerned that because the premises is situated in an area where there is already a large concentration of licensed premises, the cumulative impact of such an application will have a negative effect on the crime and disorder objective, especially when the application requests a closing time of 3.00am.

Cleveland Police are concerned that the cumulative impact of such an application may also have a negative effect on the public nuisance objective. For example, there is a likelihood of noise from patrons leaving the premises and litter on the streets.

If you wish to discuss the matter, please do not hesitate to contact PC Hanson at Hartlepool Police.

Yours faithfully,

**M. Nevison**  
**Assistant Legal Adviser**

Mr. Z. Sarwary,  
Italiano's Takeaway,  
29 Park Road,  
Hartlepool. TS24 7PW