

# **LICENSING ACT SUB-COMMITTEE AGENDA**



**Tuesday 2<sup>nd</sup> March 2010**

**at 10.00 am**

**in the Council Chamber  
Civic Centre, Hartlepool**

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

Councillors Fleet, McKenna and Tumilty

- 1. APOLOGIES FOR ABSENCE**
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
- 3. ITEMS FOR DECISION**
  - 3.1 Application for a new Premises Licence – Trinity Guest House,  
5 Church Street, Seaton Carew – *Assistant Director, Community Safety  
and Protection*

## **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. Representative of the Assistant Director for Community Safety and Protection outlines the application, any relevant representations and relevancy to Licensing Policy and statutory guidance.
3. Members ask any questions of the representative of the Assistant Director for Community Safety and Protection.
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:** Assistant Director, Community Safety and Protection

**Subject:** APPLICATION FOR A NEW PREMISES LICENCE -  
TRINITY GUEST HOUSE, 5 CHURCH STREET,  
SEATON CAREW

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## 1. PURPOSE OF REPORT

- 1.1 To consider an application for a new Premises Licence in respect of Trinity Guest House, 5 Church Street, Seaton Carew, Hartlepool.

## 2. SUMMARY OF APPLICATION

- 2.1 Applicant: Miss Kelly Daniels

Premises: Trinity Guest House  
5 Church Street  
Seaton Carew  
Hartlepool  
TS25 1BX

- 2.2 The applicant has applied for the following:

Supply of alcohol	Monday – Saturday	1730 – 2300
	Sunday	1200 – 1630

A copy of the application is attached as **Appendix 1**.

## 3. BACKGROUND

- 3.1 The application has been advertised in the prescribed manner and **144** representations have been received from Interested Parties and one representation has been received from Cleveland Police.
- 3.2 The nature of the representations received can be summarised as follows:
- Nuisance and public safety concerns associated with traffic and parking difficulties.
  - Increased noise for residents living close by.
  - Nuisance to residents caused by increase in footfall.
  - Increased crime and disorder.

- 3.3 Following receipt of representations, and in compliance with statutory requirements, a Notice of Hearing has been sent to the applicant and those making representations.

#### 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 In order to assist Members with their understanding of the geographical context of the application, a map and photographs of the area are attached as **Appendices 2-12**.
- 4.3 The Licensing Act states that representations must be made by Interested Parties who either live or work in the vicinity of the premises being considered for a licence. There is no statutory definition of 'vicinity' and, as such, Members must determine whether any of the representations received should be classed as not relevant due to the nature of the objection raised and the location of the objector's home/business compared to that of the proposed licensed premises.
- 4.4 The vast majority of representations have been made on a pro forma letter, a copy of which is attached as **Appendix 13**. In addition to this a number of non standard letters have been received which are attached as **Appendix 14**.
- 4.5 Members may wish to note that when those who had submitted pro forma letters of objection were invited to the licensing hearing, two of the 'objectors' denied making objections and could not explain why their addresses had been provided.
- 4.6 The representation from Cleveland Police is attached as **Appendix 15**.
- 4.7 In response to representations being received the applicant has agreed to a number of conditions that will be attached to the licence, should it be granted. These include the provision of a CCTV system, Challenge 21 policy and an undertaking that alcohol will only be supplied to customers purchasing a table meal.
- 4.8 A number of interested parties have referred to concerns regarding the absence of appropriate planning permission for the proposed development. Hartlepool Borough Council's Planning Department has been consulted and have stated that they do not have an objection to the application.
- 4.9 Having regard to the representations received, Members may take any of the following steps for the promotion of the licensing objectives:



- i) Grant the application without amendment
- ii) Grant the application in part and/or with conditions or amended conditions
- iii) Refuse the application

4.10 The licensing objectives are:

- i) The prevention of crime and disorder
- ii) Public safety
- iii) The prevention of public nuisance, and
- iv) The protection of children from harm

4.11 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 what aspects, if any, of the proposed application should be granted and, if appropriate, what conditions, if any, should be attached.

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 KELLY DAVIES 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	
5 CHURCH STREET - TRINITY GUEST HOUSE SEATON CARM HARTLEPOOL TEESSIDE	
Post Town HARTLEPOOL	Post Code TS25 1BX

Telephone number at premises (if any)

01429 277770

Non-domestic rateable value of premises

£ up to 4,300

### 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 *          |   |
| 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 ☐ please complete section (B)
- d) a charity ☐ please complete section (B)
- 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input checked="" type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname <b>DANIELS</b>			First names <b>KELLY</b>		
I am 18 years old or over				<input checked="" type="checkbox"/> Please tick yes	
Current postal address if different from premises address		TRINITY GUEST HOUSE 5 CHURCH STREET SEATON CARR 1			
Post Town	HARTLEPOOL			Postcode	TS25 1BX
Daytime contact telephone number		01429 277770			
E-mail address (optional)		info@trinityguesthouse.co.uk			

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
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?

ASAP.

Day	Month	Year
01	02	10

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

Day	Month	Year

Please give a general description of the premises (please read guidance note1)

Currently operating as a bed and breakfast with a dining room in place, would like to open a small bistro seating 25-30 people. facilities in place for kitchen, toilets etc. Residents of the bed and breakfast currently use the dining room as a breakfast room.

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

— NA —

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment**

**Please tick yes**

- |  |                          |
|--|--------------------------|
| 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:**

- |  |                          |
|--|--------------------------|
| 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><u>Will the performance of a play take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)		Indoors <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>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</u></b> (please read guidance note 5)		
Sat					
Sun					

# 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> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)			
Mon						
Tue						
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)			
Thur						
Fri						
Sat			<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)			
Sun						



# C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b><u>Please give further details</u></b> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Wed			
Thur			<b><u>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</u></b> (please read guidance note 5)
Fri			
Sat			
Sun			

# D

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Thur					
Fri					
Sat			<b><u>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</u></b> (please read guidance note 5)		
Sun					

# 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</b> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish	<b>Both</b> <input type="checkbox"/>			
Mon						
Tue			<b>Please give further details here</b> (please read guidance note 3)			
Wed						
Thur			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)			
Fri						
Sat			<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</b> (please read guidance note 5)			
Sun						

**F**

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

# G

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

I

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

J

<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</b> (see guidance note 2)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
			<b>Please give a description of the facilities for dancing you will be providing</b>	
Day	Start	Finish		
Mon			<b>Please give further details here</b> (please read guidance note 3)	
Tue				
Wed			<b>State any seasonal variations for providing dancing facilities</b> (please read guidance note 4)	
Thur				
Fri			<b>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</b> (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><u>Please give a description of the type of entertainment facility you will be providing</u></b>	
Day	Start	Finish	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors <input type="checkbox"/>
Mon				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)	
Wed				
Thur			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u></b> (please read guidance note 4)	
Fri				
Sat			<b><u>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</u></b> (please read guidance note 5)	
Sun				

L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)			
Mon						
Tue						
Wed			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)			
Thur						
Fri						
Sat			<b>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</b> (please read guidance note 5)			
Sun						

M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption (Please tick box)</b> (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	17.30	23.00			
Tue	17.30	23.00			
Wed	17.30	23.00			
Thur	17.30	23.00			
Fri	17.30	23.00			
Sat	17.30	23.00			
Sun	12.00	16.30	<b>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</b> (please read guidance note 5)  NA		

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

Name		KELLY DAVIES
Address		5 CHURCH STREET SEATON CARR HARTLEPOOL
Postcode	TS25 1BA	
Personal Licence number (if known)		Application Pending
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)

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	06:00	23:30	<p>NA</p> <p>Non standard timings. Where you intend 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)</p> <p>NA</p>
Tue	06:00	23:30	
Wed	06:00	23:30	
Thur	06:00	23:30	
Fri	06:00	23:30	
Sat	06:00	23:30	
Sun	06:00	23:30	

**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)

will ensure that all CCTV equipment is in full working order at all times. Will ensure that all patrons will be age checked. Doors and windows will be kept closed at all times to reduce noise to local residents. Notices placed advising patrons to be respectful of local residents will be used on exits.

**b) The prevention of crime and disorder**

CCTV is present on the premises.  
Will display signage showing CCTV is present.

**c) Public safety**

Ensure health + Safety risk assessments are undertaken along with fire safety assessments.  
Will liaise regularly with all relevant authorities ~~reg~~ to ensure public safety.

**d) The prevention of public nuisance**

Signage on exits advising patrons to respect local residents and are quiet on departure.  
Doors and windows closed at all times to reduce any noise.  
Notices displaying public parking places around the area to keep parking at a minimum outside.

**e) The protection of children from harm**


Age check all patrons, no unaccompanied children will be allowed on the premises

- 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	5/1/10
Capacity	Manager

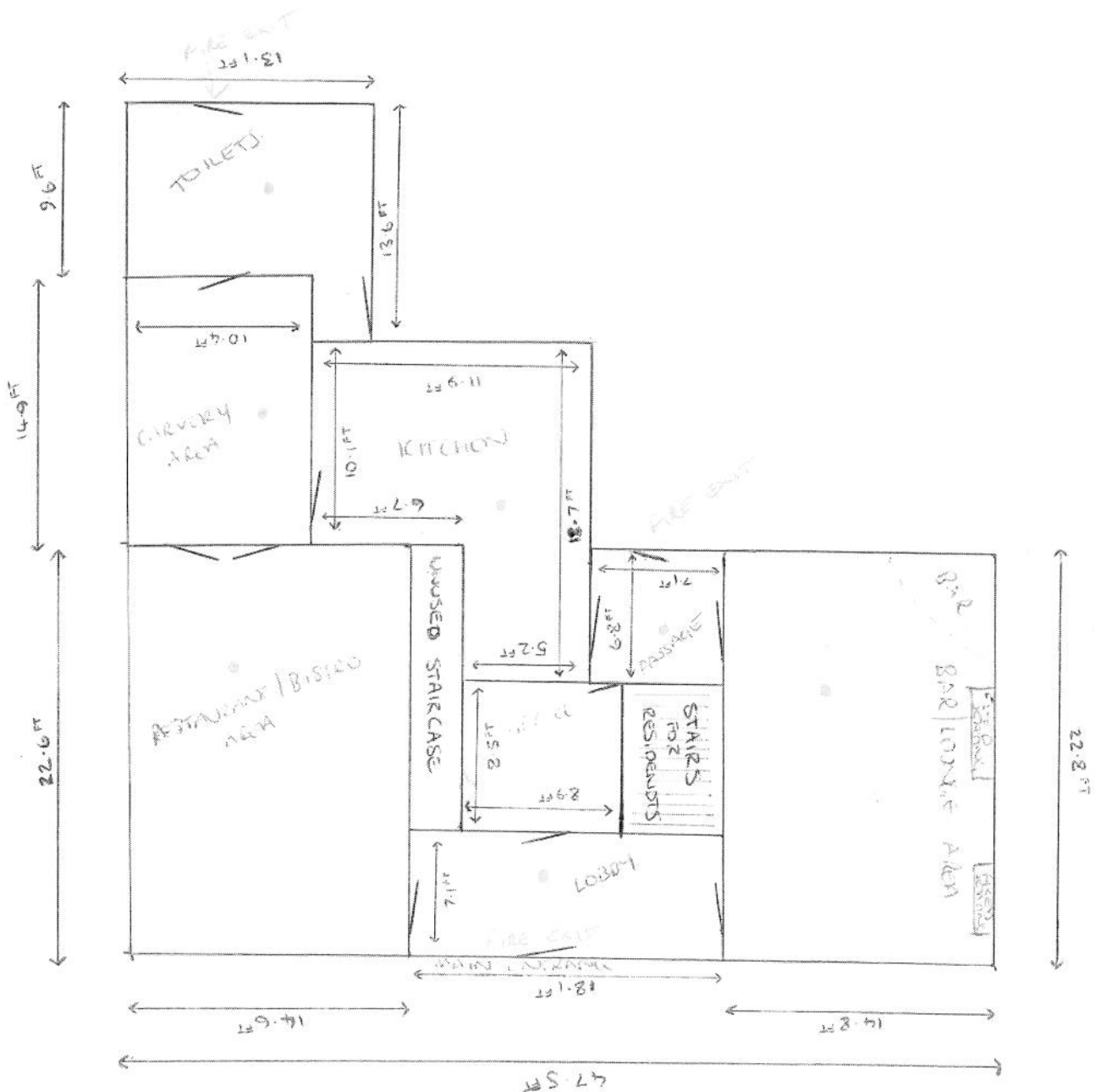
**For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent.** (please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

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)			

- = smoke Detectors Interlinked (L2)
- x = Fire Alarm Panel
- = Areas for the sale of alcohol



1 Crawford Street  
Church Lea  
Seaton Carew  
Hartlepool  
TS25 1UT  
20<sup>th</sup> January 2010

Dear Sir,

**Trinity Guest House, 5 Church Street Seaton Carew**

It has come to my knowledge that the above address have applied for a licence to sell alcohol as part of a Bistro venture. The application was placed on street furniture close to the address however does not specify trading hours.

I would like to object to the proposal as a person who resides in the area of the premises in question.

The basis of my opposition is based upon the four licensing objectives.

**1. The prevention of crime and disorder**

The area suffers from the above in terms of excessive littering from the numerous fast food establishments close to hand as well as shops located on the Front at Seaton Carew. Furthermore the littering of "spent" cigarettes would no doubt increase quite substantially based on the law of smoking in public places. As an example this can be seen outside the Seaton Hotel in the same street. Similarly the public house offers the same "Bistro" facilities in terms of meals and alcohol beverages.

**2. Public safety**

As the proposal intimates that persons will be dining there is a distinct lack of public parking close to hand as Church Street has double yellow lines and bollards next to the address.

Where would parking be?

Major Cooper court would not be an option – where would residents park.

The closest area to park would either be at the rear of the Seaton Hotel or on Crawford Street. Currently we are disturbed by late night revelers' making their way home either by foot or car. If the proposal was approved then this would further add to my woes and those of my immediate neighbours. To further this cars from the Bed and Breakfast tend to park on the path especially in front of Seaton Holy Trinity Church.

**3. The prevention of nuisance**

The dwellings close the Trinity Guest House are by definition residential having a broad spectrum of ages living there. The development will make additional nuisance with comings and goings of taxis sounding their horns to advise passengers of the arrivals. I would imagine this would happen at all times during trading hours and probably beyond.

Quite simply there is insufficient facility for car parking in the area.

I am unsure what paragraph to insert this as it can easily go into 2 or 3

Deliveries, be it alcohol or foodstuffs, would be a problem as there is no access that I can see to the front elevation of the building.

If for arguments sake deliveries would be made to the rear of the premises then direct access is only available opposite number 3 Crawford Street. This would have an immediate impact on all address on Crawford Street from number 1 upto and including probably number 7. As it is refuse collection does take place on a Tuesday with receptacles' being left out for a while, recently the "green" wheelie bin was left out for over 7 days

**4. The protection of children from harm**

The increase in road traffic will undoubtedly cause problems especially at delivery times in view of the fact that the School is no more than 100 meters away. At the moment there are problems for parents



dropping/picking up at school times. It is quite frightening to observe the mayhem that happens at these times which can only multiply with the presence of the proposed development

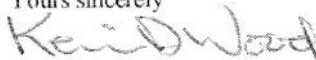
The area within the proximity of the development has more than enough establishments of a similar nature to provide a service:-

- 3 x Fish and Chips Shops plus 2 adjoining restaurants
- 2 x Public Houses. The trading premises offer the same "Bistro" facilities in terms of meals and alcohol beverages.
- 1 Public House Closed
- Indian Restaurant - licensed
- Chinese Take Away
- Numerous cafes
- Italian Restaurant - licensed
- Ice Cream Shops
- Kebab Take away

In conclusion I object to the approval of the licensing on the following grounds of unsuitability for the reason stated below

that the premises are not suitable given their location  
the nature or use of the premises is likely to cause undue public nuisance,  
the safeguarding of local residents would be under threat,  
that the grant of the licence would result in an over-provision of such facilities  
homes being to be directly or indirectly affected by nuisance occurring from either inside,  
immediately outside or in close proximity the premises for which application is made being

Yours sincerely



Kevin D. Wood

Mr I Harrison  
Consumer Services  
Principal Licensing Officer  
HBC, Civic Centre Level 3

Cc Julie Humphreys, Licensing Admin Officer

Miss Alison Bates  
Proprietor  
Safford House  
3 Church Street, Seaton Carew, Hartlepool,  
TS25 1BX

Mr. I. Harrison  
The Licensing Section  
Public Protection & housing  
Hartlepool Borough Council  
Civic Centre  
Hartlepool  
TS24 8AY

Thursday 21<sup>st</sup> January, 2010

Dear Mr. Harrison

Re: Objection to Premises Licence Application- Trinity Guest, 5 Church Street, Seaton Carew

I am writing to object to the proposed granting of a license to no 5 Church Street, Seaton Carew, with an Alcohol License for the following hours.

Monday - Saturday 17:30 - 23:00 and Sunday 12:00 - 16:30

Public opening hours 06:00 - 23:30 Monday - Sunday

I wish to object on the following grounds.

1. Public Safety.

As I am aware of the proprietor of no 5 church streets, seaton Carew dos not own or control any land in which would be available for off street parking for guests and visitors, the street is also a residential area with young children living in the area. At present there are 7 residential homes in the street with at least one vehicle pear house old and two guest houses which creates in its self problems for parking. The road is very narrow and has double yellow lines on one side of the road.

Passing traffic is constant with the church at the end of the street and more residential homes, also a nursing home with this being the only access rout. If the application is given I would propose for a highway licenses permit for residential parking only to elevate any parking problems.

## 2. The Prevention of Public Nuisance.

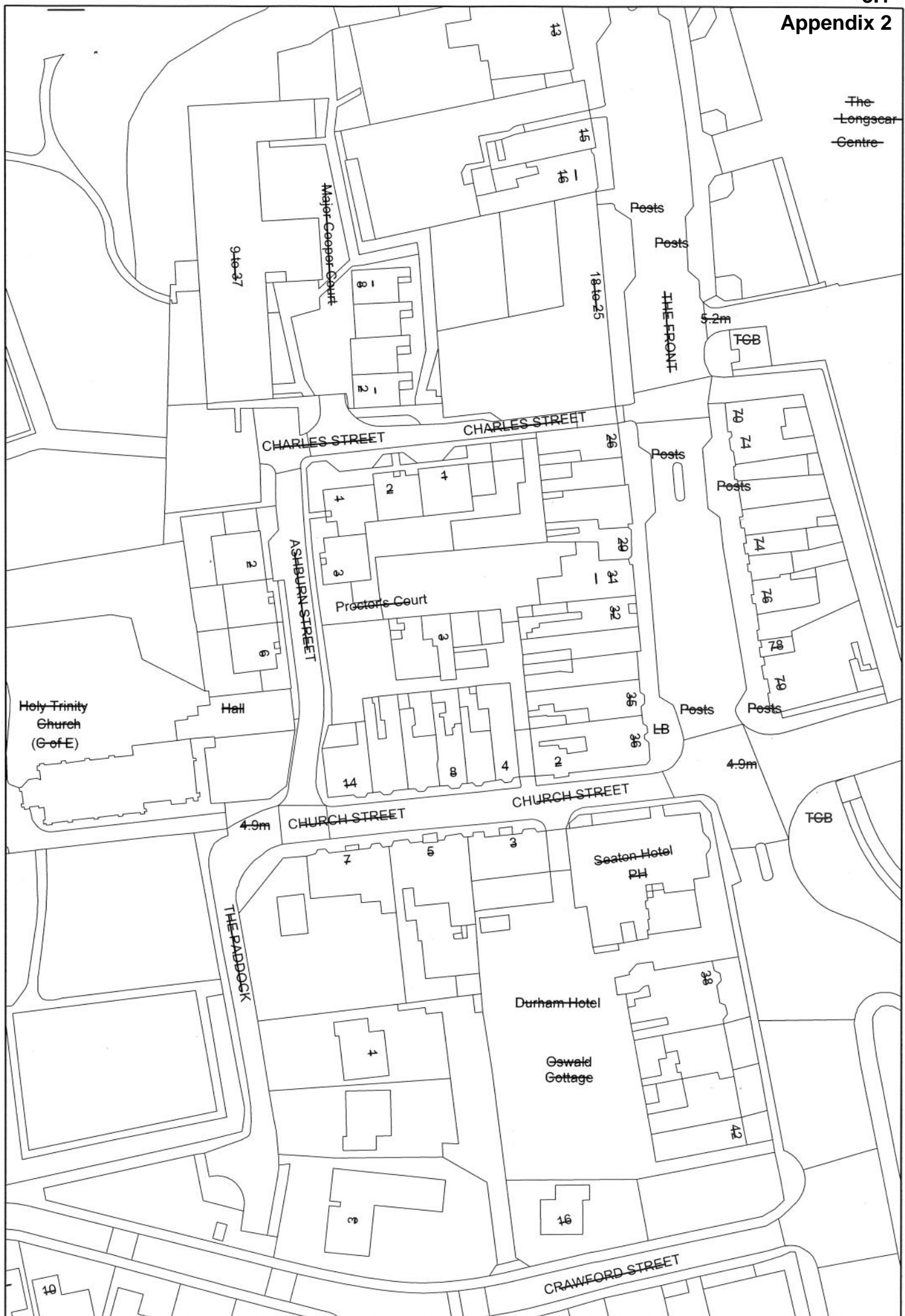
As stated in section 1 the road is very narrow and from each property you have visible sight into the overset properties with the invasion of priers. My property is attached to no 5 church street and as for the increased road disturbance of people being dropped off and picked up, the room in which the bistro will be situated is on the ground floor of which one of my bedrooms is attached. With noise levels from the music, volume of people and alcohol in the bistro it would make sleeping in imposable at night and day as some guests work nights. Number 5 is attacked to two properties from either side.

## 3. Protection of children from harm

This is a great concern of mine as this is the proprietor and very young family's reagents also the owner's residency whom is the father of my two children and as there sleep over from time to time and the living accomadshon is also on the ground floor of number 5 extreme internal security would almost have to accur to ensure there safety.

Kind Regards

A handwritten signature in dark ink, appearing to be 'A. J.', written in a cursive style.



**BREAKFAST ROOM 1**

**APPENDIX 3**



**BREAKFAST ROOM 2**

**APPENDIX 4**





**CHURCH END – LEFT TURN**

**APPENDIX 5**



**CHURCH END – RIGHT TURN**

**APPENDIX 6**





**DINING ROOM 1**

**APPENDIX 7**



**ENTRANCE TO CHURCH STREET – SEATON HOTEL END**

**APPENDIX 8**



**OUTSIDE NO 5 TOWARDS CHURCH**

**APPENDIX 9**

