

# LICENSING SUB-COMMITTEE

## AGENDA



**Thursday 13<sup>th</sup> February 2020**

**at 11.30am**

**in Committee Room C,  
Civic Centre, Hartlepool**

**MEMBERS: LICENSING SUB-COMMITTEE:**

Councillors Cassidy, Hamilton and Johnson

- 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: 141 Oxford Road – *Assistant Director (Environment and Neighbourhood Services)*



# 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. The Assistant Director (Environment & Neighbourhood Services), or representative shall outline the application, any relevant representations and relevancy to Licensing Policy and statutory guidance.
3. Members ask any questions of the Assistant Director (Environment & Neighbourhood Services), or representative.
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 to 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 (Environment & Neighbourhood Services)

**Subject:** APPLICATION FOR A NEW PREMISES LICENCE:  
141 OXFORD ROAD, HARTLEPOOL

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## 1. PURPOSE OF REPORT

- 1.1 To consider an application for a new premises licence in respect of 141 Oxford Road, Hartlepool.

## 2. SUMMARY OF APPLICATION

- 2.1 Applicant: Mr Sultan Mahmood Goher

Premises: 141 Oxford Road  
Hartlepool  
TS24 7SD

- 2.2 The applicant has applied for authorisation to sell alcohol between 0900 and 2200 hours, seven days a week.

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

A map of the area is attached as **Appendix 2** and photographs of the premises are attached as **Appendix 3** (shown as '*Bargains Locally*').

## 3. BACKGROUND

- 3.1 The application has been advertised in the prescribed manner and two representations were received – both from local residents (**Appendices 4 and 5**).

- 3.2 The representations collectively refer to the potential impact of granting a licence on the licensing objectives of: -

- Prevention of Crime & Disorder
- Prevention of Public Nuisance
- Protection of Children from Harm.

- 3.3 The premises has previously been licensed to sell alcohol but the licence was revoked by a licensing committee on 18<sup>th</sup> October 2016 following a review brought by Hartlepool Borough Council's Trading Standards Team.

- 3.4 The review was as a consequence of numerous sales of counterfeit tobacco at the premises and a number of seizures of counterfeit tobacco.
- 3.5 The licence holder at that time was Mr Kamil Faraj Amin but the actual ownership of the business was never truly established. The owner of the property itself was, and still is, Mr Irfan Johar, who is the applicant's brother.
- 3.6 As part of the application process, the applicant has offered to undertake a number of actions/obligations that, if granted, would become legally binding conditions on the licence. These include the installation and operation of a comprehensive CCTV system and a 'Challenge 25' age verification policy.
- 3.7 Other licensed premises in the vicinity are: -

<u>Name of Premises</u>	<u>Latest Standard Licensed Hour</u>
Best One	2300 hours
Spar	2300 hours
119 Cornwall Street	2300 hours

#### 4. **ISSUES**

- 4.1 As relevant representations have been received, a hearing must be held for Members to consider the application (unless all parties agree a hearing is unnecessary).
- 4.2 Having regard to the representations received, Members may take any of the following steps for the promotion of the licensing objectives:
- i) To approve the application in its entirety
  - ii) To approve the application in part - with or without the addition of further conditions
  - iii) To reject the whole or part of the application
- 4.3 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 the objectors and determine what aspects, if any, of the application should be granted and, if appropriate, what conditions, if any, should be attached.

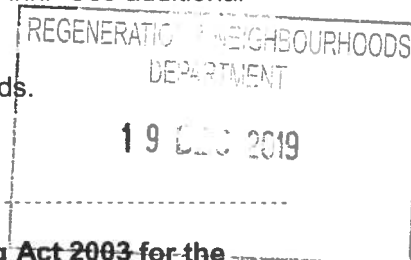
new one application

**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 in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.



I/We SULTAN GOMER  
(Insert name(s) of applicant)

apply for a premises licence under section 17 of 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			
141 OXFORD ROAD			
Post town	HARTLEPOOL	Postcode	TS25 5RJ

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£

**Part 2 - Applicant details**

Please state whether you are applying for a premises licence as appropriate      Please tick as appropriate

- |  |                                     |                             |
|--|-------------------------------------|-----------------------------|
| 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/limited liability partnership | <input type="checkbox"/>            | please complete section (B) |
| ii as a partnership (other than limited liability)   | <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) |
| e) the proprietor of an educational establishment    | <input type="checkbox"/>            | 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 in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ 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 (by ticking yes to one box below):

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 checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname <u>GOHER</u>			First names <u>SULTAN MAHMOOD</u>		
Date of birth over			I am 18 years old or <input checked="" type="checkbox"/> Please tick yes		
Nation:					
Current residential address if different from premises address					
Post town					Postcode
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 2 for information)					

**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)	
<b>Surname</b>			<b>First names</b>		
<b>Date of birth</b> over			I am 18 years old or <input type="checkbox"/> Please tick yes		
<b>Nationality</b>					
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					
<b>Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 2 for information)</b>					

**(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?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

GENERAL DEALER .

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

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

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

Provision of regulated entertainment (please read guidance note 2)

Please tick all that  
apply

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

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

☐

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

☒

In all cases complete boxes K, L and M



# A

<b>Plays</b> Standard days and timings (please read guidance note 7)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 3)		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 4)		
Mon					
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 5)		
Thur					
Fri			<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 6)		
Sat					
Sun					

# B

<b>Films</b> Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)		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 4)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
Thur					
Fri			<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 6)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Tue			
Wed			
Thur			<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> (please read guidance note 6)
Fri			
Sat			
Sun			

# D

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)			
Tue						
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 5)			
Thur						
Fri			<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 6)			
Sat						
Sun						

E

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	
			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 4)	
Mon				
Tue				
			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 5)	
Wed				
Thur				
			<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 6)	
Fri				
Sat				
Sun				

# F

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)		
Tue					
Wed			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 5)		
Thur					
Fri			<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 6)		
Sat					
Sun					

# G

<b>Performances of dance</b> Standard days and timings (please read guidance note 7)			<b>Will the performance of dance take place indoors or outdoors or both – please tick</b> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both <input type="checkbox"/>			
Mon			<b>Please give further details here</b> (please read guidance note 4)			
Tue						
Wed			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 5)			
Thur						
Fri			<b>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</b> (please read guidance note 6)			
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 7)			Please give a description of the type of entertainment you will be providing	
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)	
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 5)	
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 6)	
Sun				



<b>Late night refreshment</b> Standard days and timings (please read guidance note 7)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<u>Please give further details here</u> (please read guidance note 4)			
Tue						
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)			
Thur						
Fri			<u>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</u> (please read guidance note 6)			
Sat						
Sun						

J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)		
Mon	09:00	22:00			
Tue	09:00	22:00			
Wed	09:00	22:00			
Thur	09:00	22:00	<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 6)		
Fri	09:00	22:00			
Sat	09:00	22:00			
Sun	09:00	22:00			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name	MR SULTAN MAHMOOD GOMER
Date of birth	
Address	
Postcode	
Personal I	
Issuing licensing authority (if known)	HARTLEPOOL

**K**

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 9).

**L**

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b><u>State any seasonal variations</u></b> (please read guidance note 5)
Day	Start	Finish	<b><u>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</u></b> (please read guidance note 6)
Mon	06:00	22:00	
Tue	06:00	22:00	
Wed	06:00	22:00	
Thur	06:00	22:00	
Fri	06:00	22:00	
Sat	06:00	22:00	
Sun	06:00	22:00	

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

**a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)**

WILL COMPLY WITH SAME CONDITIONS AS  
PREVIOUS LICENCE (ISSUED 20-6-16) FOR  
141 OXFORD ROAD .

ATTACHED .

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

//

**c) Public safety**

//

**d) The prevention of public nuisance**

//

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

//

## **ANNEX 2 – Conditions consistent with the Operating Schedule**

1. Closed Circuit Television System (CCTV) must be installed and maintained in good working order and be correctly time and date stamped. The system will incorporate sufficient built-in hard drive capacity to suit the number of cameras installed, whilst complying with Data Protection Legislation. CCTV will be capable of providing pictures of evidential quality in all lighting conditions, particularly facial recognition. Cameras will encompass all ingress to the premises, outside areas and all areas where the sale/supply of alcohol occurs. There will be a minimum of 28 days recording required. The system must have a minimum of a simplex multiplexing facility and be recording for 24 hours a day. The system will incorporate a means of transferring images from the hard-drive to a format that can be played back on any desktop computer. The digital recorder must have the facility to be password protected to prevent unauthorised access, tampering, or deletion of images. There will be at all times a member of staff on duty who is trained in the use of the equipment and upon receipt of a request for footage from police or any other responsible Authority, will be able to produce footage within a reasonable time – within 24hrs or immediately if urgently required for investigation of serious crime
2. A "Challenge 25" policy shall be operated at the premises at all times. Customers attempting to purchase alcohol who appear to be less than 25 shall be challenged by staff to produce a passport, photo driving licence or a PASS approved Proof-of-Age card. No other form of identification shall be accepted. The policy shall be documented and all staff must have received sufficient training to ensure they understand it and can comply with it. A written record shall be maintained detailing when the Challenge 25 training was provided and shall be signed as confirmation by the member of staff whom the record relates. The policy and training records shall be made available for inspection by Police Officers or other authorised officers. A Challenge 25 Notice or Poster shall be visible at the entrance of the premises and at each point of sale to both inform the public and remind staff of the policy.
3. At the sales counter there shall be a means of alerting or reminding staff to verify the age of a prospective purchaser whenever an age restricted product is presented for purchase.
4. The business must maintain a <sup>refusals</sup> ~~referrals~~ book to record all occasions where the supply of alcohol has been refused including dates/times, staff member and description of the incident. The Designated Premises Supervisor/Store manager/Business Owner is to check the book and sign/date it at least every 28 days.
5. Groups of people will be discouraged from congregating outside the premises.
6. Signage will be displayed to encourage customers to leave the premises quietly

7. Roller blind shutters must be installed to cover alcohol on display in the shop between 06:00 – 09:00.
8. Regular checks shall be made by staff for litter outside the premises.
9. Notices shall be displayed saying 'No Alcohol will be sold to persons under 18 years of age.'

**Checklist:**

**Please tick to indicate agreement**

- 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 designated 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.
- 

☐ ~~F23A90~~

☐ should have copy on file

☒

☒

☒

☒

[Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15).

☒

**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.**

**Part 4 – Signatures** (please read guidance note 11)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

<b>Declaration</b>	<ul style="list-style-type: none"><li>• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).</li><li>• The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15).</li></ul>
Signature	
Date	19-12-19
Capacity	OWNER

**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 13). **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 14)

Post town

Postcode

Telephone number (if any)

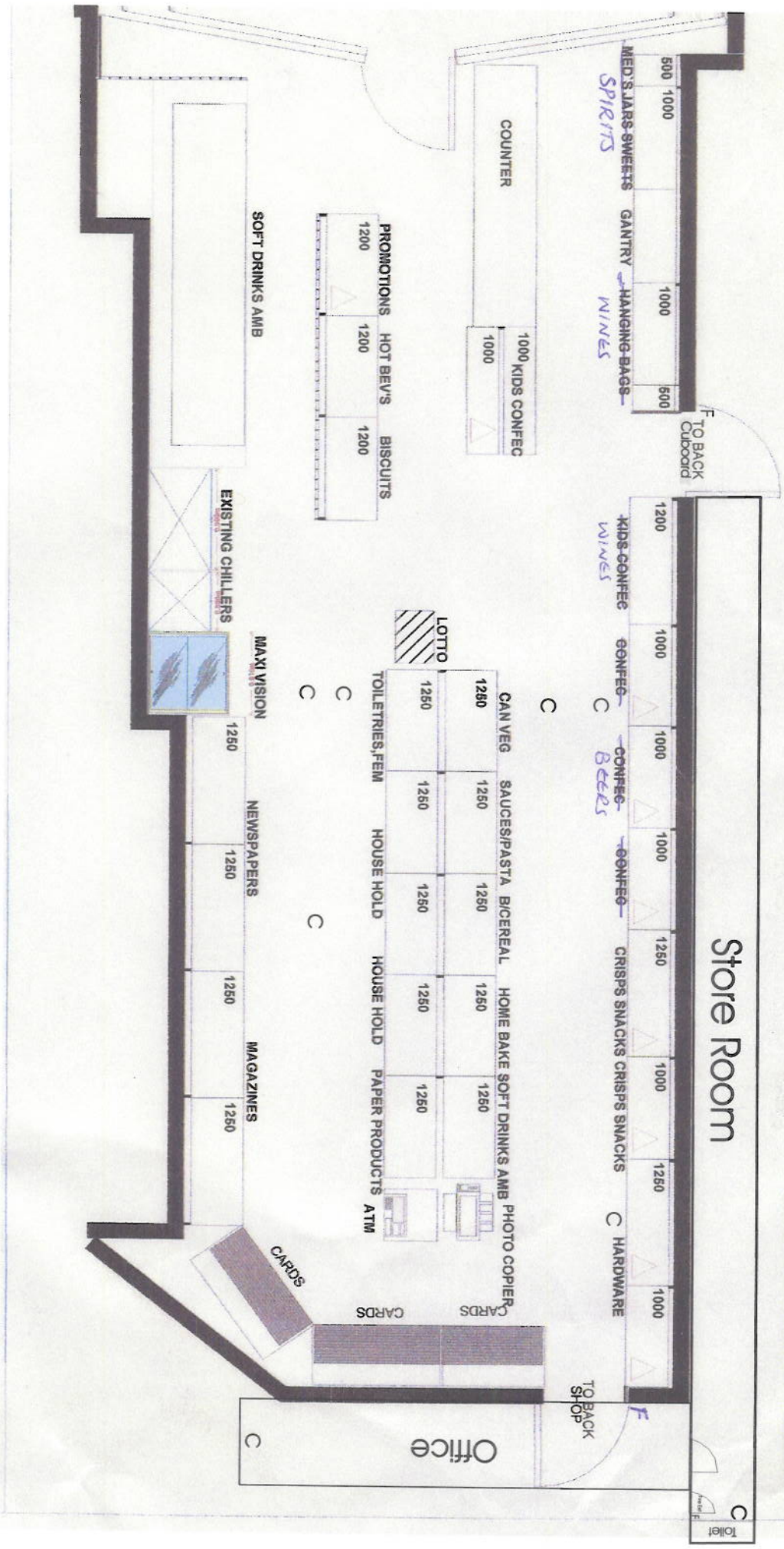
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)



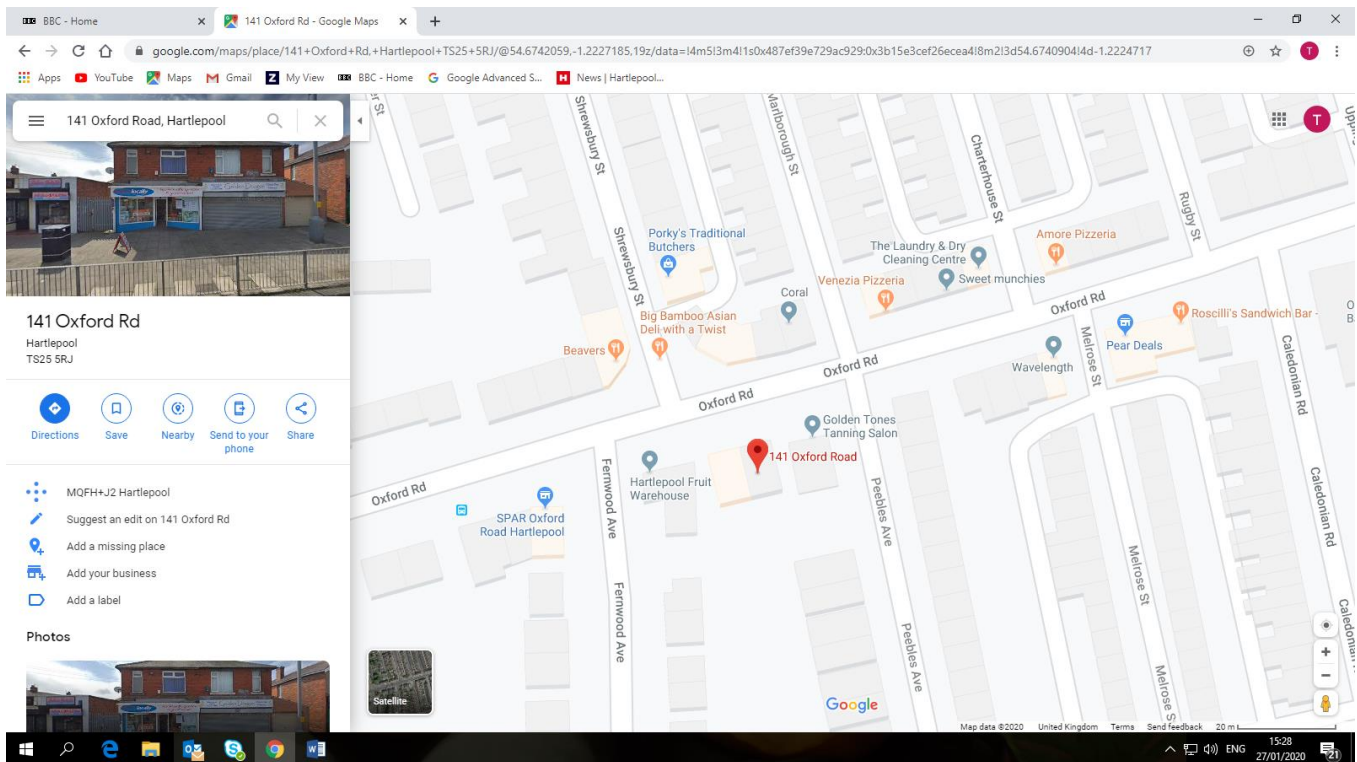
CLASSIC NEWS  
 141 OXFORD ROAD  
 Harefield TS25 5RJ



C = Camera  
 F = Fire Extinguisher  
 NEW ORLEANS EPOS TICKET STALL REQUIRED

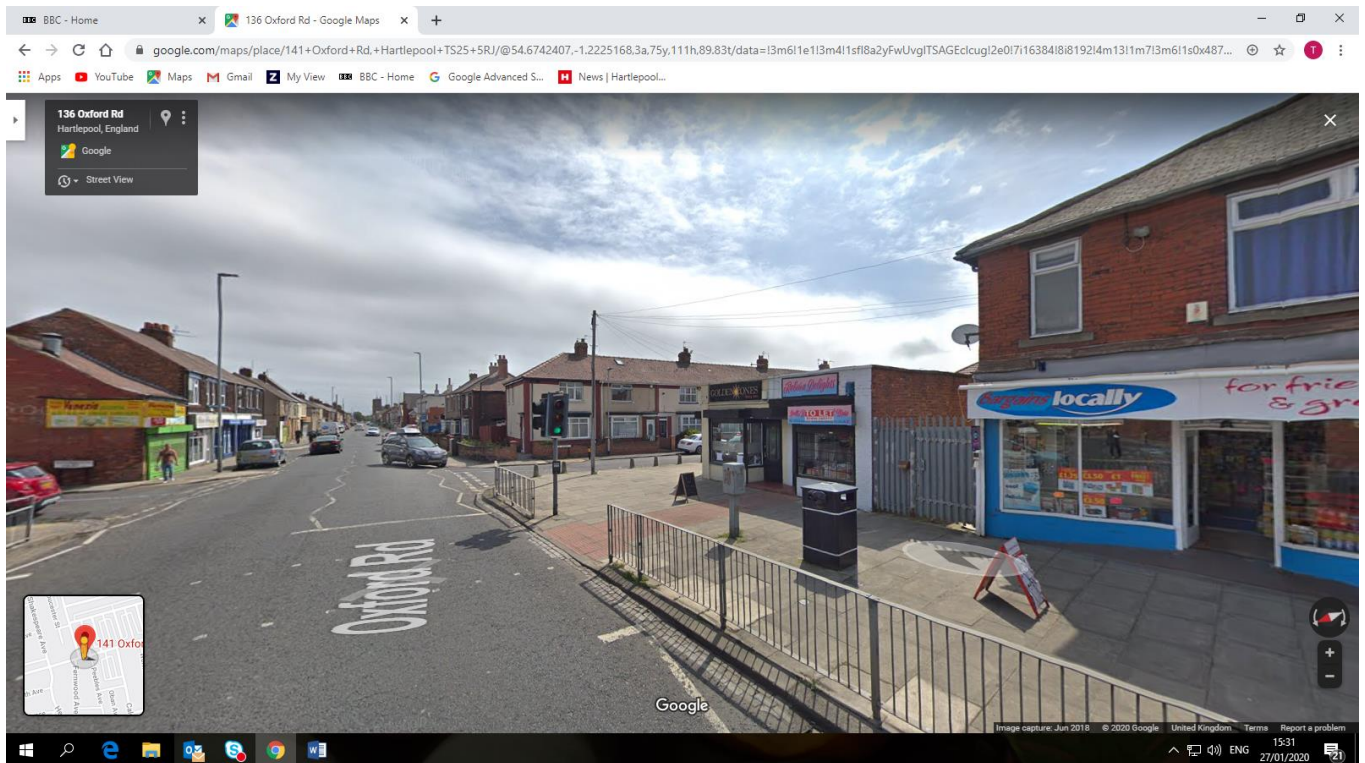


## Appendix 2





## Appendix 3



**Matthew Davies**

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**From:** [REDACTED]  
**Sent:** 05 January 2020 21:05  
**To:** Licensing  
**Subject:** Proposed Liqueur Licence @ 141 Oxford Rd Hartlepool

**Categories:** Green Category

Re Liqueur Licence @ 141 Oxford Road Hartlepool  
Applicant = Mr Sultan Goher

Dear Sir or Madame

Wish to object to the above application,  
I live directly opposite the above premises

My concerns are as follows

1. An increase in crime and Disorder due to the late night sale of alcohol to the general public.
2. An increase in public nuisance due to the consumption of alcohol outside the above premises.
3. The protection of children from harm due to the danger of the sale of alcohol to under age persons.

Yours faithfully

[REDACTED]  
[REDACTED]  
[REDACTED]

Sent from Mail for Windows 10

Click [here](#) to report this email as spam.



**Matthew Davies**

---

**From:** [REDACTED]  
**Sent:** 02 January 2020 17:08  
**To:** Licensing  
**Subject:** 141 oxford road

Hi

I object to the plan submitted I live direct proximity of the premises and considering that in less than 300m we have 3 premises that sell alcohol. I do not think this warrants a license. The premises has previous been owned by the named person and closed on numerous occasions for selling to under age people and illegal cigarettes etc. The area is already plagued with crime, drugs and alcohol with people littering the people never stick to the terms of the license and I believe as previous mentioned by public health England that another shop selling alcohol is not needed and puts an already deprived area at risk. The people around this area are becoming more and more sick of noise, anti social behaviour and litter. Our street will be directly effected as will my residence!

I therefore wish to object in the strongest possible terms

[REDACTED]  
[REDACTED]  
[REDACTED]

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