

LICENSING SUB-COMMITTEE

AGENDA



Thursday 16th March 2023

at 10.00am

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

MEMBERS: LICENSING SUB-COMMITTEE:

Councillors Hall, Jackson and D Nicholson

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 – Unit 3, Navigation Point, Hartlepool – *Assistant Director (Regulatory Services)*

CIVIC CENTRE EVACUATION AND ASSEMBLY PROCEDURE

In the event of a fire alarm or a bomb alarm, please leave by the nearest emergency exit as directed by Council Officers. A Fire Alarm is a continuous ringing. A Bomb Alarm is a continuous tone. The Assembly Point for everyone is Victory Square by the Cenotaph. If the meeting has to be evacuated, please proceed to the Assembly Point so that you can be safely accounted for.

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 (Regulatory 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 (Regulatory 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 (Regulatory Services)

Subject: APPLICATION FOR A NEW PREMISES LICENCE -
UNIT 3 NAVIGATION POINT, HARTLEPOOL

1. PURPOSE OF REPORT

- 1.1 To consider an application for a new premises licence in respect of Unit 3 Navigation Point, Hartlepool.

2. SUMMARY OF APPLICATION

- 2.1 Applicant: Mr Nazim Uddin

- 2.2 The applicant has applied for a new premises licence for premises described as an 'Indian Restaurant and Take away' and for the following licensable activities: -

Sale of Alcohol	Monday – Saturday	12:00 – 23:45 hours
	Sunday	12:00 – 23:15 hours

Late Night Refreshment Monday – Sunday 23:00 hours - midnight

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

A map of the area is attached as **Appendix 2** and street view images of the premises are attached as **Appendix 3** (2nd premises to the right of 'Blue Lounge').

3. BACKGROUND

- 3.1 The premises to which this application relates has most recently traded as 'Kilimanjaro' but when this closed, the licence was surrendered and, as such, a new licence is now needed by the new owner and operator.
- 3.2 The previous licence authorised the sale of alcohol to a latest time of 23:00 hours on Monday – Saturday and 22:30 hours on Sundays.

4. ISSUES

- 4.1 The application has been advertised in the prescribed manner and one objection has been received. The objector, who is a resident at Navigation Point has exercised their right to remain anonymous. As such, and to avoid

their identification through interpretation of the wording of their objection, it can be summarised as concerns regarding noise nuisance caused by an extension of the opening hours from those permitted by the previous licence.

- 4.2 As relevant representations have been received, a hearing must be held for Members to consider the application.
- 4.3 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
- 4.4 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
- 4.5 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.

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 NAZIM UDDIN
(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 UNIT 3 NAVIGATION POINT HARTLEPOOL TS24 0UH	
Post town	HARTLEPOOL
Postcode	TS24 0UH

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ 16,250.

Part 2 - Applicant details

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

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/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		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 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	Miss	Ms	Other Title (for example, Rev)	
Surname UDDIN			First names NAZIM		
Date of birth		am 18 years old or over		Please tick yes	
Nationality					
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 'share code' provided to the applicant by that service (please see note 15 for information)					
Share Code:					

Second individual applicant (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth or over		I am 18 years old		Please tick yes	
Nationality					
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 'share code' provided to the applicant by that service: (please see note 15 for information)					
Share Code:					

(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
01 03 2023

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

DD MM YYYY

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

INDIAN RESTAURANT & TAKEAWAY
HOT FOOD & ALCOHOL

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

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<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> (please read guidance note 6)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur					
Fri					
Sat			<u>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</u> (please read guidance note 6)		
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			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			<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)
Thur			
Fri			
Sat			
Sun			

D

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

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finis h		Both	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Thur					
Fri			<u>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</u> (please read guidance note 6)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur					
Fri			<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> (please read guidance note 6)		
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur					
Fri			<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> (please read guidance note 6)		
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) 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	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
Mon				Outdoors	
				Both	
Tue			Please give further details here (please read guidance note 4)		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)		
Fri					
Sat			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 (please read guidance note 6)		
Sun					

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	12 23:00	12 00:00	Please give further details here (please read guidance note 4) <i>including takeaways & deliveries</i>		
Tue	12 23:00	12 00:00			
Wed	12 23:00	12 00:00	State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Thur	12 23:00	12 00:00			
Fri	12 23:00	12 00:00	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 6)		
Sat	12 23:00	12 00:00			
Sun	12 23:00	11:30 00:00			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	12 pm 12:00	12 am 23:45			
Tue	12 pm 12:00	12 am 23:45			
Wed	12 pm 12:00	12 am 23:45			
Thur	12 pm 12:00	12 am 23:45	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 6)		
Fri	12 pm 12:00	12 am 23:45			
Sat	12 pm 12:00	12 am 23:45			
Sun	12 pm 12:00	11:30 pm 23:15			

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	NAZIM UDDIN
Date of birth	[REDACTED]
Address	[REDACTED]
Postcode	[REDACTED]
Personal licence number (if known)	[REDACTED]
Issuing licensing authority (if known)	HARTLEPOOL BOROUGH COUNCIL

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

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	12pm	12Am	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 6)
Tue	12pm	12Am	
Wed	12pm	12Am	
Thur	12pm	12Am	
Fri	12pm	12Am	
Sat	12pm	12Am	
Sun	12pm	11:30pm	

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)

b) The prevention of crime and disorder

CCTV
SECURITY (FRIDAY / SATURDAY)

c) Public safety

CCTV
SECURITY (FRIDAY / SATURDAY)

d) The prevention of public nuisance

N/A

e) The protection of children from harm

N/A

Checklist:**Please tick to indicate agreement**


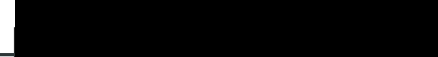

<input checked="" type="checkbox"/>	I have made or enclosed payment of the fee.	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	I have enclosed the plan of the premises.	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	I have sent copies of this application and the plan to responsible authorities and others where applicable.	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	I understand that I must now advertise my application.	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<div>I understand that if I do not comply with the above requirements my application will be rejected.</div> <div>[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 or my share code issued by the Home Office online right to work checking service (please read note 15).</div>	<input checked="" type="checkbox"/>

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.**

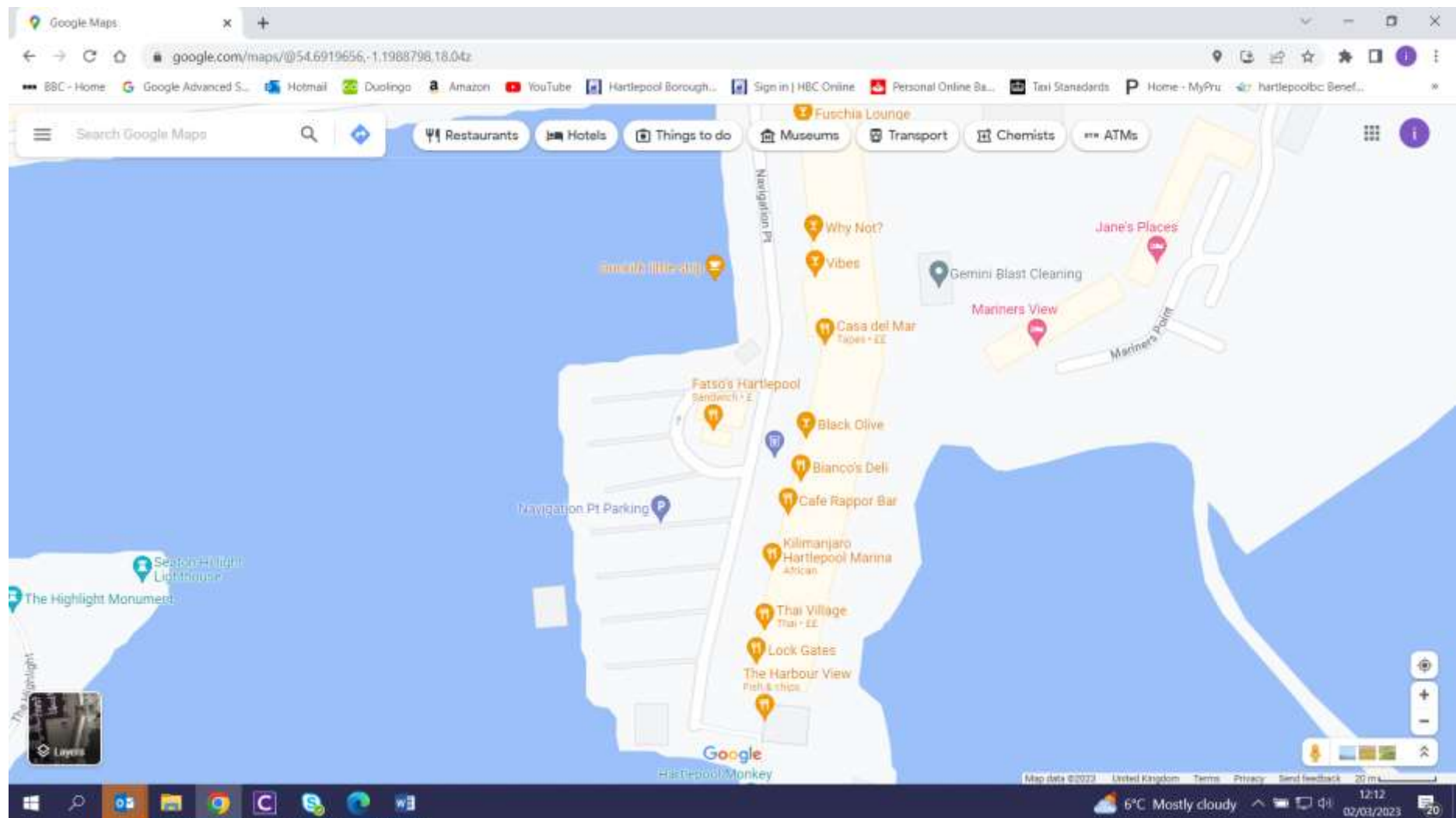
Declaration	<ul style="list-style-type: none">• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am 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).• 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)
Signature	
Date	
Capacity	

For joint applications, signature of 2nd applicant or 2nd 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)			

3.1 Appendix 2



3.1 Appendix 3

