

**Report of the Assistant Director Environmental & Regulatory Services to the meeting of the Keighley/Shipley Area Licensing Panel to be held on 1 December 2011.**

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**Subject:**

**Application for a Premises Licence for 14 Springfield Mount (Outbuilding), Addingham.**

**Summary statement:**

**Application for a new premises licence for the sale of alcohol for consumption off the premises.**

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John Major  
Assistant Director  
Environmental & Regulatory Services

**Portfolio:**  
**Environment & Waste Management**

Report Contact: Melanie McGurk  
Senior Licensing Officer  
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**Overview & Scrutiny Area:**  
**Environment & Waste Management**  
**Safer & Stronger Communities**



2008-2011  
Improving Public Services  
Empowering Communities



diventia & venia

Suzan Hemingway, Assistant Director Corporate Services (City Solicitor)



**1. SUMMARY**

The application is for the grant of a Premises Licence for the sale of alcohol for consumption off the premises.

**2. BACKGROUND**

**2.1 The applicant**

Mrs Fiona Louise Mann.

A copy of the application is included at Appendix 1.

**2.2 The Premises**

14 Springfield Mount (Outbuilding), Addingham

**2.3 Application**

The application is for the grant of a Premises Licence for the sale of alcohol for consumption off the premises

Hours of licensable activities:

Monday to Sunday: 09.00 to 00.00

**2.4 Steps proposed by the applicant to address the Licensing Objectives**

a) Prevention of crime and disorder will be achieved by;

As general, sale only – not consumption will be minimal.

b) Public safety will be achieved by;

As general. Springfield Mount is a quiet road and visitors will be minimal

c) Prevention of public nuisance will be achieved by;

As general and public safety. Sales & visitors will be minimal.

d) Protection of children from harm will be achieved by;

As general. Sales & visitors will be minimal and children unlikely to be present. Licence would be for sale and not consumption.

e) General – all four licensing objectives

The outhouse (premises in question) will be used mainly for storage. Visitors if any will be few and at sociable hour. Most sales will take place at other licensed premises.

## **2.6 Relevant Representations Received**

### **Interested Parties**

Three letters of representation have been received. The letters raise concerns regarding the late trading hours and noise and disturbance from customers visiting the premises late at night.

The representations are attached at Appendix 2.

## **3. OVERVIEW AND SCRUTINY COMMITTEE CONSIDERATION**

Not applicable.

## **4. OTHER CONSIDERATIONS**

### **Legal Appraisal**

4.1 The Licensing Act 2003 requires the Council to carry out its various licensing functions so as to promote the following four licensing objectives:

- a) the prevention of crime and disorder
- b) public safety
- c) the prevention of public nuisance
- d) the protection of children from harm

4.2 The Council must also have regard to the guidance issued by the Department of Culture Media and Sport under Section 182 of the Licensing Act 2003. Regard must also be taken of the Council's statement of Licensing Policy for the District.

4.3 Where it is decided it is necessary to depart from the statutory guidance or the Licensing Policy on the merits of a particular case; then special reasons justifying this must be given that can be sustained.

4.4 Only "relevant representations" by or expressly on behalf of a defined "interested party" or "responsible authority" can be taken into account. In order to be "relevant" a representation must fairly relate to achieving a licensing objective. If it does not, it must be discounted.

4.5 Any licensing conditions that Members may propose attaching must also relate to achieving one of the licensing objectives; be tailored to the actual premises and style of licensable activity; must be reasonably achievable by the applicant and in his/her control.

### **Statement of Policy Issues**

4.6 The following parts of the Licensing Policy are of particular importance; Part 6 (prevention of public nuisance).

4.7 The Annexes to the Policy sets out various types of model condition that could be considered.

## **5. OPTIONS**

5.1 Members may:

- (a) Grant a premises licence as applied for subject to any mandatory conditions and the precautions specified in the operating schedule submitted.
- (b) Grant a premises licence subject to such additional conditions relating to achievement of the licensing objectives as members think fit; or
- (c) Refuse the application for a premises licence.

5.2 Should the applicant or any other party to the hearing feel aggrieved at any decision with regard to the licence or to any conditions or restrictions attached by Members they may appeal to the Magistrates Court.

## **6. FINANCIAL & RESOURCE APPRAISAL**

There are no apparent finance or resource implications.

## **7. RISK MANAGEMENT**

There are no apparent risk management implications.

## **8. LEGAL APPRAISAL**

Referred to in part 4 of this report.

## **9. OTHER IMPLICATIONS**

### **9.1 EQUAL RIGHTS**

There are no apparent equal rights implications.

### **9.2 SUSTAINABILITY IMPLICATIONS**

There are no apparent sustainability implications.

### **9.3 GREENHOUSE GAS EMISSIONS IMPACTS**

There are no apparent greenhouse gas emissions impacts.

### **9.4 COMMUNITY SAFETY IMPLICATIONS**

When determining the application the Licensing Authority is required to pay due regard to the licensing objectives referred to in 4.1 of this report.

**9.5 HUMAN RIGHTS ACT**

The following rights are applicable:

Article 1 First Protocol to the Convention – Right to peaceful enjoyment of possessions subject to the state’s right to control the use of property in accordance with the general interest. The Council’s powers set out in the recommendations fall within the states right. A fair balance must be struck between public safety and the applicant’s rights.

Article 6 – A procedural right to a fair hearing. As refusal of the application is an option, adherence to the Panels’ usual procedure of affording a hearing to the applicant is very important. The applicant should also be able to examine the requirements of the fire authority. If the decision is to refuse then reasons should be given.

**9.6 TRADE UNION**

Not applicable

**9.7 WARD IMPLICATIONS**

Ward Councillors have been notified of receipt of the application.

**10. NOT FOR PUBLICATION DOCUMENTS**

None.

**11. RECOMMENDATIONS**

Members are invited to consider the information and documents referred to in this report and, after hearing interested parties, determine the related application.

**12. APPENDICES**

1. Application form received 19 October 2011.
2. Letters of representation.

**13. BACKGROUND DOCUMENTS**

Application form, plan etc.

Licensing Team, Room 402, City Hall, Bradford, BD1 1HY

**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 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 FIONA LOUISE MANN (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 <u>BOOTHWAITE, 14 SPRINGFIELD MOUNT, ADDINGHAM ILKLEY, WEST YORKSHIRE</u>	
Post town <u>ILKLEY</u>	Post code <u>LS29 0JB</u>

Telephone number at premises (if any)

01943 830533

Non domestic rateable value of premises

£ LESS THAN £10000 LICENSING UNIT  
BAND A

**Part 2 – Applicant Details**

Please state whether you are applying for a Premises Licence as:

- Please tick  **LEGISLATION**
- a) an individual or individuals\*  please complete section (A)
  - b) a person other than an individual\*
    - i. as a limited company  please complete section (B)
    - ii. as a partnership  please complete section (B)
    - iii. as an unincorporated association or  please complete section (B)
    - iv. Other (for example a statutory corporation)  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)

10 OCT 2011

- 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)

Please tick ✓

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

- 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 First names

MANN

FIONA LOUISE

Please tick ✓

I am 18 years old or over

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

01943 830533 / 07968 962955

Email address (optional)

fiona.mann@mannaevents.co.uk

**SECOND INDIVIDUAL APPLICANT (if applicable)**

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

Surname

First names

Please tick

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 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
18	11	2011

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

Day	Month	Year

If 5000 or more people are expected to attend the premises at any one time, please state the number expected to attend

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

OUTHOUSE (STONE-BUILT + SECURE/LOCKABLE)  
ADJACENT TO MY HOUSE TO BE USED  
FOR THE STORAGE OF HOME-MADE  
FRUIT LIQUEURS E.G. SLOE GIN.  
SALES WOULD BE MINIMAL /  
OCCASIONAL AS MOST SALES ARE  
AT OTHER LICENCED PREMISES.

OUTHOUSE IS DETACHED + SINGLE STOREY.  
ON MY PROPERTY/LAND.

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)

**Provision of regulated entertainment**

- 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) performance 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)

Please tick ✓

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

N/A

**Provision of entertainment facilities for:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

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

<input type="checkbox"/>	N/A
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**Sale by retail of alcohol (if ticking yes, fill in box M)**

<input checked="" type="checkbox"/>
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**In all cases complete boxes N, O and P**

# A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

# B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of a films take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

### 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			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			
Thur			
Fri			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)
Sat			
Sun			

### D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	
Day	Start	Finish	Indoors	Outdoors
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				

Please give further details here (please read guidance note 3)

State any seasonal variations for the boxing or wrestling entertainment (please read guidance note 4)

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

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri			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)		
Sat					
Sun					

# F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					
Fri			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. (please read guidance note 5)		
Sat					
Sun					

# G

<b>Performance of dance</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of dance take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)</b>	<b>Indoors</b>	
				<b>Outdoors</b>	
				<b>Both</b>	
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here (please read guidance note 3)</b>		
Mon					
Tue			<b>State any seasonal variations for the performance of dance (please read guidance note 4)</b>		
Wed					
Thur			<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. (please read guidance note 5)</b>		
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>Please give a description of the type of entertainment you will be providing</b>		
			<b>Will this entertainment take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)</b>	<b>Indoors</b>	
				<b>Outdoors</b>	
				<b>Both</b>	
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here (please read guidance note 3)</b>		
Mon					
Tue			<b>State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</b>		
Wed					
Thur			<b>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 5)</b>		
Fri					
Sat					
Sun					

I

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

J

<b>Provision of facilities for dancing</b> Standard days & timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (✓) (please read guidance note 2)		Indoors	
					Outdoors	
					Both	
Day	Start	Finish				
Mon			Please give a description of the facilities for dancing you will be providing			
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 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)			Please give a description of the type of entertainment facility you will be providing		
			Will the entertainment facility be place indoors or outdoors or both – please tick (✓) (please read guidance note 2)		Indoors
				Outdoors	
				Both	
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for the provisions of facilities for entertainment of a similar description to that falling within (i) or (j) (please read guidance note 4)		
Wed					
Thur			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)		
Fri					
Sat					
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 (✓) (please read guidance note 2)		
					Indoors
				Outdoors	
				Both	
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Wed					
Thur			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)		
Fri					
Sat					
Sun					



**M**

<b>Sale of alcohol</b> Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption on or off the premises or both – please tick (✓) (please read guidance note 7)	On the premises	
				Off the premises	✓
				Both	
Day	Start	Finish	State any seasonal variations for the sale of alcohol (please read guidance note 4) <b>I HAVE STATED A WIDE RANGE OF TIMES TO COVER ALL EVENTUALITIES. IN PRACTISE I WOULD ENVISAGE SELLING FEWER THAN 5 BOTTLES PER MONTH - USUALLY IN DAYLIGHT HOURS</b>		
Mon	0900	2400			
Tue	0900	2400			
Wed	0900	2400			
Thur	0900	2400			
Fri	0900	2400			
Sat	0900	2400			
Sun	0900	2400			
			Non standard timings. Where you intend to use the premises for the sale of alcohol at different times to those listed in the column on the left, please list. (please read guidance note 5)		

State the name and details of the individual whom you wish to specify on the licence as premises supervisor	
Name	FIONA LOUISE MANN (MYSELF)
Address	BOUTHWAITE, IN SPRINGFIELD MOUNT ADDINGHAM, ILKLEY, WEST YORKSHIRE
Postcode	LS29 0JB
Personal licence number (if known)	BD / PER 3260
Issuing licensing authority (if known)	BRADFORD COUNCIL

# 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)

*(This section is currently blank and contains faint, illegible bleed-through text from the reverse side of the page.)*

# 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	0900	2400	<p>AS WITH SECTION M, I EXPECT VERY FEW VISITORS, IF ANY, BUT HAVE INCLUDED TIMINGS TO COVER ALL OPTIONS. THE OUTHOUSE WILL BE USED MAINLY FOR STORAGE.</p>	
Tue	0900	2400		
Wed	0900	2400		
Thur	0900	2400		<p>Non standard timings. Where you intend to open 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>
Fri	0900	2400		
Sat	0900	2400		
Sun	0900	2400		

## 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)

THE OUTHOUSE (PREMISES IN QUESTION) WILL BE USED MAINLY FOR STORAGE. VISITORS IF ANY WILL BE FEW AND AT SOCIABLE HOURS. MOST SALES WILL TAKE PLACE AT OTHER LICENCED PREMISES.

b) The prevention of crime and disorder

AS ABOVE. SALE ONLY - NOT CONSUMPTION - WILL BE MINIMAL.

c) Public safety

AS a) ABOVE. SPRINGFIELD MOUNT IS A QUIET ROAD AND VISITORS WILL BE MINIMAL

d) The prevention of public nuisance

AS a) AND c) ABOVE.  
SALES + VISITORS WILL BE MINIMAL

e) The protection of children from harm

AS a) ABOVE. SALES + VISITORS WILL BE MINIMAL AND CHILDREN UNLIKELY TO BE PRESENT. LICENCE WOULD BE FOR SALE NOT CONSUMPTION.

Please tick ✓

- I have made or enclosed payment of the fee
- I have enclosed a 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

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

**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 ..... 17/10/11  
 Capacity ..... APPLICANT / PERSONAL LICENCE HOLDER

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 19)	
BOOTHWAITE, 14 SPRINGFIELD MOUNT ADDINGTON, ILKLEY, WEST YORKSHIRE	
Post town ILKLEY	Post code LS29 0JB
Telephone number (if any) 01943 830533 / 07968 962955	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) fiona.mann@mannaevents.co.uk	

## Notes for guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which would be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and provide a place for consumption of these off-supplies you must include a description of where the place is 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.
6. 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 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.

**Melanie McGurk**

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**From:** Licensing Team  
**Sent:** 28 October 2011 15:33  
**To:** Melanie McGurk  
**Subject:** FW: Objection to licensing application for 14 Springfield mount addingham,

Elizabeth Flynn  
Licensing Officer

Environment & Sport

City of Bradford Metropolitan District Council, 6th Floor, Jacobs Well (North),  
Bradford, BD1 5RW

Telephone: 01274 432240

Fax: 01274 432109

Web: [www.bradford.gov.uk](http://www.bradford.gov.uk)

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P Please consider the environment before printing this email.

-----Original Message-----

**From:**  
**Sent:** 28 October 2011 14:55  
**To:** Licensing Team  
**Subject:** Objection to licensing application for 14 Springfield mount addingham,

Dear Sir/Madame,

I am writing to register my concerns regarding the application for a license to sell alcohol that has been made by my neighbour Mrs Mann. I have lived on Springfield mount for over 30 years and it is a quiet cul de sac where many young families live and raise their children. Mrs Mann's application to sell alcohol from her home is going to cause an unreasonable level of disruption to the neighbourhood not only from the noise of customers coming to buy alcohol from her up to midnight, but also from the increased traffic. It is extremely difficult to turn around at the end of Springfield mount as the road is narrow and badly lit and this is bound to cause difficulties for residents and customers alike ( the road is 5 meters wide and if people are unable to turn they would be forced to back onto a main road where visibility is poor for oncoming traffic as Springfield has quite a concealed entrance). Also, as an unadopted road, the residents of Springfield will be forced to pay for the additional wear and tear caused to the road surface by Mrs Mann's customers.

In conclusion this application is wholly inappropriate for the area and is a cause of great concern for many of the residents who I am sure you will be hearing from.

Thank you for your time,  
Mr  
Springfield mount, addingham.

Tel: 01943

SPRINGFIELD MOUNT  
ADDINGHAM, ILKLEY  
LS29 0JB  
28<sup>th</sup> October 2011

Dear Sir/Madam

**Re BOUTHWAITE 14 SPRINGFIELD MOUNT  
ADDINGHAM ILKLEY LS29 0JB**

I write with reference to the application for a LIQOR LICENCE for the above property and wish to lodge notice of appeal against the grant of such a licence. I was for many years a member of the Licencing Panel on the Keighley Bench and have approached this matter in the same way that we would have looked at it had it been lodged with the Court.

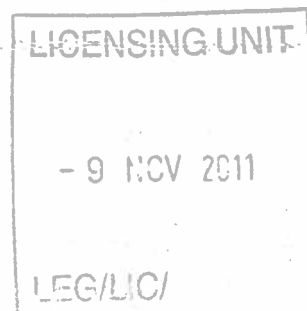
The grounds of my application are:

- 1) The location of the property is at the end of a private unadopted cul de sac with poor uneven surface and surrounded by houses with no room to turn a vehicle, and thus not suitable for such a business. Also the residents often have vehicles outside their properties restricting the road width available.
- 2) The area is quite private and if granted any purchasers would become aware of the seclusion giving possible knowledge to persons who might have illegal activities in mind.
- 3) The hours of proposed trading would be likely to cause a nuisance to neighbours.
- 4) The applicants have young children and they could be concerned.
- 5) Such a licence would have an adverse effect on property values also affecting any possible sale of property

If you require further information please contact me.

Yours faithfully

Department of Legal and Democratic Services  
Licencing Team. Room 402  
City Hall  
BRADFORD BD1 1HY



**Endor Crescent  
Burley in Wharfedale  
LS29 7QH**

Dept of Legal and Democratic Services  
Licencing Team  
Room 402  
City Hall  
Bradford  
BD1 1HY

31<sup>st</sup> October 2011

Dear Sir/Madam

**Application for licence to sell alcohol from Bouthwaite 14 Springfield Mount Addingham  
LS29 0BY**

I am the owner of number Springfield Mount the adjoining property. The property is currently tenanted.

I wish to object to the granting of this licence for the following reasons.

- This is quiet residential street of only domestic dwellings and I believe granting a licence will increase the volume of traffic. Young children play frequently in the street.
- Springfield Mount is an unmade road. Extra visitors in their cars will cause extra wear of the road surface.
- The road is a cul de sac and parking and turning is restrictive at the best of times. I believe it is unreasonable for driveways to be used for the purposes of vehicles turning and leaving the street.
- There would be additional vehicle noise which might include the slamming of car doors until late in the evening.
- The application revolves around the production of alcohol and therefore potentially flammable liquids which is inappropriate in a residential area. In an emergency a fire appliance may have difficulty attending particularly if there are parked cars obstructing access.
- I believe licensing hours of 9.00am to 12.00 midnight is unacceptable in a quiet residential. If the property receives visitors late in the evening and they sample the products offered it is only a matter of time before the visitors become more vocal.

Yours faithfully

