

Report of the Assistant Director Environmental & Regulatory Services to the meeting of the Bradford Area Licensing Panel to be held on 16 December 2011.

E

Subject:

Application for a Premises Licence for 4/6 The Square, Lower Grange, Bradford.

Summary statement:

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

John Major
Assistant Director
Environmental & Regulatory Services

Portfolio:
Environment & Waste Management

Report Contact: Melanie McGurk
Senior Licensing Officer
Phone: (01274) 431873
E-mail: melanie.mcgurk@bradford.gov.uk

Overview & Scrutiny Area:
Environment & Waste Management
Safer & Stronger Communities



2005-2007
Improving Rural Services
Empowering Communities



institute of planning

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

Mr Zahid Mehmood Dar

A copy of the application is included at Appendix 1.

2.2 The Premises

4/6 The Square, Lower Grange, Bradford

2.3 Designated Premises Supervisor

Zahid Mehmood Dar

2.4 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 Friday: 08.00 to 23.00
Saturday & Sunday: 09.00 to 23.00

2.5 Steps proposed by the applicant to address the Licensing Objectives

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

Drugs Policies/Notices
Use of a communication link to other licensed premises in the area

b) Public safety will be achieved by;

CCTV cameras being installed for public safety and to reduce disorder
First Aid provision

c) Prevention of public nuisance will be achieved by;

Litter clearance

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

Proof of age scheme EG Challenge 21

- e) General – all four licensing objectives

Staff Training on licensing issues

Installing a suitable CCTV system following consultation with the West Yorkshire Police

2.6 Relevant Representations Received

Interested Parties

Local Businesses – Two letters of representation have been received. The representations raise concerns of age restricted products being sold to underage children and anti-social behaviour and noise nuisance from youths congregating in the area.

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 4 (prevention of crime and disorder), Part 6 (prevention of public nuisance) and Part 7 (protection of children from harm).

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 26 October 2011. (In the interests of economy this document has been sent to Members of the Panel only. A public inspection copy is available in Committee Secretariat, Room 112, City Hall, Bradford or on www.bradford.gov.uk).
2. Letters of representation.

13. BACKGROUND DOCUMENTS

Application form, plan etc.

Licensing Team, 6th Floor North, Jacobs Well, Bradford, BD1 5RW

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 ZAHID MEHMOOD DAR
 (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>4/6 THE SQUARE LOWER CRANLE BRADFORD</u>	
Post town <u>BRADFORD</u>	Post code <u>BD8 0QB</u>

Telephone number at premises (if any) 01274 881023

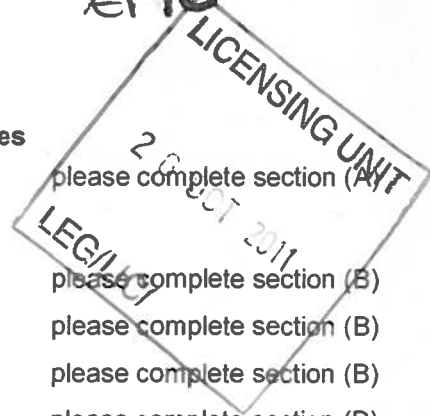
Non domestic rateable value of premises £ 5,100 not checked

Band B £190

Part 2 – Applicant Details

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

- | | Please tick | ✓ | Yes | |
|---|-------------------------------------|---|-----|-----------------------------|
| a) an individual or individuals* | <input checked="" type="checkbox"/> | | | please complete section (A) |
| b) a person other than an individual* | <input type="checkbox"/> | | | please complete section (B) |
| i. as a limited company | <input type="checkbox"/> | | | please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> | | | please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> | | | please complete section (B) |
| iv. Other (for example a statutory corporation) | <input type="checkbox"/> | | | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | | | please complete section (B) |
| d) a charity | <input type="checkbox"/> | | | please complete section (B) |
| e) the proprietor of an educational establishment | <input type="checkbox"/> | | | please complete section (B) |
| f) a health service body | <input type="checkbox"/> | | | 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 | <input type="checkbox"/> | | | please complete section (B) |



SECOND INDIVIDUAL APPLICANT (if applicable)

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

Surname First names

I am 18 years old or over **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 case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

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

Part 3 - Operating Schedule

When do you want the premises licence to start?

Day	Month	Year
2	01	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

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

THE PREMISES IS A MID TERRACED SHOP CONSISTS OF TWO FLOORS. THE GROUND FLOOR WILL BE USED TO SELL ALCOHOL WHILE THE ~~SO~~FIRST FLOOR WILL BE USED AS RESIDENCE.

NO ENTERTAINMENT FACILITIES WILL BE PROVIDED ON THE PREMISES .

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 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick ✓ Yes

- 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)

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)

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

--

Sale by retail of alcohol (if ticking yes, fill in box M)

✓

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)		
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)		
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			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)
Thur			
Fri			
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)	Indoors	
Day	Start	Finish		Outdoors	
			Both		
Mon			Please give further details here (please read guidance note 3)		
Tue			State any seasonal variations for the boxing or wrestling entertainment (please read guidance note 4)		
Wed			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)		
Thur					
Fri					
Sat					
Sun					

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	
				Both	
Mon			Please give further details here (please read guidance note 3)		
Tue			State any seasonal variations for the performance of live music (please read guidance note 4)		
Wed			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)		
Thur					
Fri					
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	
				Both	
Mon			Please give further details here (please read guidance note 3)		
Tue			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Wed			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)		
Thur					
Fri					
Sat					
Sun					

G

Performance of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place 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			State any seasonal variations for the performance of dance (please read guidance note 4)		
Wed			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)		
Thur					
Fri					
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
			Will this entertainment take place 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			State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Wed			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)		
Thur					
Fri					
Sat					
Sun					

Provision of facilities for making music Standard day and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing.																																
<table border="1"> <thead> <tr> <th>Day</th> <th>Start</th> <th>Finish</th> </tr> </thead> <tbody> <tr> <td>Mon</td> <td></td> <td></td> </tr> <tr> <td>Tue</td> <td></td> <td></td> </tr> <tr> <td>Wed</td> <td></td> <td></td> </tr> <tr> <td>Thur</td> <td></td> <td></td> </tr> <tr> <td>Fri</td> <td></td> <td></td> </tr> <tr> <td>Sat</td> <td></td> <td></td> </tr> <tr> <td>Sun</td> <td></td> <td></td> </tr> </tbody> </table>			Day	Start	Finish	Mon			Tue			Wed			Thur			Fri			Sat			Sun			<table border="1"> <tr> <td rowspan="3">Will the facilities for making music be indoors or outdoors or both – please tick (✓) (please read guidance note 2)</td> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>		Will the facilities for making music be indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors		Outdoors		Both	
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Tue																																			
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	Outdoors																																		
	Both																																		
Please give further details here (please read guidance note 3)																																			
State any seasonal variations for the provision of facilities for making music (please read guidance note 4)																																			
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)																																			

J

Provision of facilities for dancing 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)																																
<table border="1"> <thead> <tr> <th>Day</th> <th>Start</th> <th>Finish</th> </tr> </thead> <tbody> <tr> <td>Mon</td> <td></td> <td></td> </tr> <tr> <td>Tue</td> <td></td> <td></td> </tr> <tr> <td>Wed</td> <td></td> <td></td> </tr> <tr> <td>Thur</td> <td></td> <td></td> </tr> <tr> <td>Fri</td> <td></td> <td></td> </tr> <tr> <td>Sat</td> <td></td> <td></td> </tr> <tr> <td>Sun</td> <td></td> <td></td> </tr> </tbody> </table>			Day	Start	Finish	Mon			Tue			Wed			Thur			Fri			Sat			Sun			<table border="1"> <tr> <td rowspan="3"></td> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>			Indoors		Outdoors		Both	
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	Outdoors																																		
	Both																																		
Please give a description of the facilities for dancing you will be providing																																			
Please give further details here (please read guidance note 3)																																			
State any seasonal variations for providing dancing facilities (please read guidance note 4)																																			
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)																																			

K

Provision of facilities for entertainment of a similar description to that falling within (i) or (j) 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)		<table border="1"> <tr> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>	Indoors		Outdoors
Indoors								
Outdoors								
Both								
Day	Start	Finish	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

Late night refreshment 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)				
			<table border="1"> <tr> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>		Indoors		Outdoors
Indoors							
Outdoors							
Both							
Day	Start	Finish	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

Sale of alcohol 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) NONE		
Mon	0800	2300			
Tue	0800	2300			
Wed	0800	2300			
Thur	0800	2300			
Fri	0800	2300			
Sat	0900	2300			
Sun	0900	2300			
			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 ZAHID MEHMOOD JAR

Address 4/6 THE SQUARE
 LOWER GRANGE BRADFORD

Postcode B08 0QB

Personal licence number (if known)

Issuing licensing authority (if known)

N

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

[This section is crossed out with a large diagonal line.]

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	<i>NONE</i>
Mon	0900	2300	
Tue	0800	2300	
Wed	0800	2300	
Thur	0800	2300	
Fri	0800	2300	
Sat	0900	2300	
Sun	0900	2300	
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)			<i>NONE</i>

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)

STAFF TRAINING ON LICENSING ISSUES.
INSTALLING A SUITABLE CCTV SYSTEM FOLLOWING CONSULTATION
WITH THE WEST YORKSHIRE POLICE.

b) The prevention of crime and disorder

DRUGS POLICIES / NOTICES.
USE OF A COMMUNICATION LINK TO OTHER LICENSED PREMISES
IN THE AREA.

c) Public safety

CCTV CAMERAS BEING INSTALLED FOR PUBLIC
SAFETY AND TO REDUCE DISORDER.
FIRST AID PROVISION.

d) The prevention of public nuisance

LITTER CLEARANCE.

e) The protection of children from harm

PROOF OF AGE SCHEME, E.S. ' CHALLENGE 21

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 25-10-2011

Capacity

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

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)

ENVIRONMENTAL & REGULATORY SERVICES
LICENSING TEAM,
6TH FLOOR NORTH,
JACOBS WEL,
BRADFORD BD1 5RW.

THE SQUARE
LOWER GRANGE
BRADFORD
BD8 0QB.

1ST NOVEMBER 2011

4 THE SQUARE

Dear Sir/Madam,

My name is Mr.

and

I own Newagent & Off license at the above address. I have been at this address for 27 years. During this time I have had ups and downs with my business. I with my wife are just about "keeping our head above water" with our business with current situation.

There is also an off license business across the road at 3 and 5 The Square which is owned by Mr

If a new license is granted at 4-6

The Square (Right next door to my business) I will be ~~star~~ struggling to keep going with my business, also

I would like to point out the following problems which will arise if a new license is granted

- (1) Late night opening until 11 p.m. will ^{cause} nuisance and noise and youngsters hanging round by the shop.
- (2) As I pointed out there are 2 off-licenses ~~within~~ within 30 metre radius providing more than adequate services to the whole area.

P.T.O.

(3) If a another license is granted which is totally not required I with my wife will definitely be struggling to keep going and may have to close our business down.

I with my wife would very much appreciate if you would ~~kindly~~ kindly consider our objections for the new application of off-license.

We are prepared to talk to any of your personnel regarding this matter. We are begging you to refuse for ~~you~~ granting another license.

Thank you

Yours sincerely

To whom it may concern,

I would like to raise an objection for the council granting the an premises off licence to Lower Grange Convenience Store, 4-6 The Square, Lower Grange, Bradford BD8 0QB. The reasons for my objection are as follows:

1. I believe they maybe selling cigarettes to underage children. My shop is opposite from there and we have turned children away because they were underage or unable to provide i.d. however the children have then gone to the shop in question and walked out with cigarettes in their hands.
2. The shop owners were also accused of behaving inappropriately to young children and also of taking photographs of them. The police was involved so you can check what happened with this.
3. They may also be selling black market cigarettes as customers that usually go to their shop come to ours when they are closed asking for cheap cigarettes.
4. Customers that started going to their shop when they first opened have now stopped after complaining that the shop always smelled of marijuana. If they are running the shop under the influence of this then how can they follow the rules and regulations of running an off licence on every occasion needed?

Please take these objections into account when making your decisions.

Many thanks

The Square
Bradford
BD8 0QB

