

## Report of the Assistant Director Corporate Services to a Hearing before the Keighley/Shipley Area Licensing Panel to be held on 1 April 2008

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### Subject:

Application for a Premises Licence for Cool Beans, Westgate House, 9 Westgate, Baildon.

### Summary statement:

Application for a new premises licence for the sale of alcohol and provision of regulated entertainment.

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Suzan Hemingway  
Assistant Director Corporate Services (City Solicitor)

**Portfolio:**

**Corporate**

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**Improvement Committee Area:**

**Corporate Improvement Committee  
Safer and Stronger Communities**



Suzan Hemingway, Assistant Director Corporate Services (City Solicitor)



Ward: Baildon

## 1. Summary

### 1.1 The applicant

Mr Damian Maxwell McLaughlin and Mrs Josie McLaughlin. A copy of the application is included at Appendix 1.

### 1.2 The Premises

Cool Beans, Westgate House, 9 Westgate, Baildon

### 1.3 Designated Premises Supervisor

Graham Dudley Moore

### 1.4 Application

The application is for the grant of a Premises Licence. The operating schedule describes the following as the relevant licensable activities applied for:-

- Sale/supply of alcohol
- Provision of regulated entertainment

Hours of licensable activities:

#### Sale of alcohol

Monday & Tuesday:	12.00 to 14.30
Wednesday & Thursday:	12.00 to 14.30 & 16.30 to 22.30
Friday & Saturday:	12.00 to 14.30 & 16.30 to 23.00
Sunday:	12.00 to 22.00

#### Provision of regulated entertainment (recorded music)

Monday & Tuesday:	08.00 to 14.30
Wednesday to Saturday:	08.00 to 14.30 & 16.30 to 23.00
Sunday:	12.00 to 22.30

Hours the premises proposed to be open:

Monday & Tuesday:	08.00 to 14.30
Wednesday & Thursday:	08.00 to 14.30 & 16.30 to 22.30
Friday & Saturday:	08.00 to 14.30 & 16.30 to 23.30
Sunday:	12.00 to 22.30

### 1.5 Steps proposed by the applicant to address the Licensing Objectives

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

Responsible sale of alcohol i.e. asking for identification for proof of age not selling too much to one individual etc.

b) Public Safety will be achieved by;

Nothing required beyond existing health & safety/fire safety etc requirements.

c) Prevention of public nuisance will be achieved by;

As stated in box b and ensuring that steps are taken to ensure that customers leave in an orderly unrowdy manner.

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

Existing health and safety/fire safety requirements monitoring sales to ensure no alcohol is given to children.

e) General – all four licensing objectives

All health and safety requirements. Effective management and customer control. Staff training on alcohol and customer service.

## 2. **Relevant Representations Received**

### 2.1 **Interested Parties**

Local Resident – A letter of representation from a local resident has been received, on the grounds of anticipated noise and disturbance from regulated entertainment and patrons leaving the premises late at night. Concerns are also raised regarding anticipated anti-social behaviour by patrons of the premises.

The letter of representation is attached at Appendix 2.

## 3. **Legal Appraisal**

3.1 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

3.2 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.

3.3 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.

3.4 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.

- 3.5 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.

#### 4. **Statement of Policy Issues**

- 4.1 The following parts of the Licensing Policy are of particular importance; Part 4 (prevention of crime and disorder) and Part 6 (prevention of Public Nuisance).

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

#### 5. **Legal 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. (this will effectively mean that the premises could not open unless by authority of a temporary event notice without breaching the licensing laws).

- 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 and resource appraisal**

- 6.1 There are no apparent finance or resource implications.

#### 7. **Other implications**

##### 7.1 **Equal Rights**

There are no apparent equal rights implications.

##### 7.3 **Community safety implications**

There are no apparent community safety implications.

##### 7.4 **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.

**8. Not for publication documents**

8.1 None

**9. The Role of the Panel**

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

**10. Appendices**

1. Application form received on 27<sup>th</sup> September 2007. 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](http://www.bradford.gov.uk).
2. Letter of representation from local resident.

**11. Background documents**

Application form, plan etc

# APPENDIX 1 COOL BEANS

City of Bradford Metropolitan District Council

www.bradford.gov.uk

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 DAMIAN & JOSIE MCCAUSHLIN (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>COOL BEANS</u> <u>WESTGATE HOUSE</u> <u>9 WESTGATE</u> <u>BAILDON</u>	
Post town <u>BRADFORD</u>	Post code <u>BD17 5EH</u>
Telephone number at premises (if any)	<u>01274 583912</u>
Non domestic rateable value of premises	<u>£ 3700</u>

### Part 2 – Applicant Details

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

- Please tick
- 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)

- 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

MCLAGHLIN DAMAN MAXWELL

Please tick ✓

I am 18 years old or over

Current postal address if different from premises address

20 CLIFFORD ROAD  
BALDWIN  
SHIPLEY

Post Town

BRADFORD

Postcode

BD175QH

Daytime contact telephone number

01274 583912

Email address (optional)

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr

Mrs

Miss

Ms

Other title  
(for example, Rev)

Surname

First names

MCLAUGHLIN

JOSIE

Please tick

I am 18 years old or over

Current postal  
address if different  
from premises  
address

20 CLIFFORD ROAD  
BAILDON

Post Town

BRADFORD

Postcode

BD17 5QH

Daytime contact telephone number

01274 581739

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
01	11	2007

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)

COFFEE SHOP AND BISTRO - GROUND FLOOR PREMISES  
FACING ONTO VILLAGE MAW ROAD.  
LONG OBLONG ROOM WITH CONSERVATORY AND SMALL  
PATIO AT BACK.

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 ✓

- |   |                                     |
|---|-------------------------------------|
| a) plays (if ticking yes, fill in box A)  | <input type="checkbox"/>            |
| b) films (if ticking yes, fill in box B)  | <input type="checkbox"/>            |
| c) indoor sporting events (if ticking yes, fill in box C)   | <input type="checkbox"/>            |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D)  | <input type="checkbox"/>            |
| e) live music (if ticking yes, fill in box E)   | <input type="checkbox"/>            |
| f) recorded music (if ticking yes, fill in box F)   | <input checked="" type="checkbox"/> |
| g) performance of dance (if ticking yes, fill in box G)   | <input type="checkbox"/>            |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/>            |

**Provision of entertainment facilities for:**

- |   |                          |
|---|--------------------------|
| i) making music (if ticking yes, fill in box I)   | <input type="checkbox"/> |
| j) dancing (if ticking yes, fill in box J)  | <input type="checkbox"/> |
| k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K) | <input type="checkbox"/> |

**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**

# 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	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon	8.00	14.30	Please give further details here (please read guidance note 3)  BACKGROUND MUSIC - RADIO OR CD	Both	
Tue	8.00	14.30			
Wed	8.00	14.30	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
	16.30	23.00			
Thur	8.00	14.30			
	16.30	23.00			
Fri	8.00	14.30	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)		
	16.30	23.00			
Sat	8.00	14.30			
	16.30	23.00			
Sun	12.00	22.30			

# 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	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the sale of alcohol (please read guidance note 4)		
Mon	12.00	14.30			
Tue	12.00	14.30	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)		
Wed	12.00	14.30			
	16.30	22.30			
Thur	12.00	14.30			
	16.30	22.30			
Fri	12.00	14.30			
	16.30	23.00			
Sat	12.00	14.30			
	16.30	23.00			
Sun	12.00	22.00			

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

Name DAMIAN McLAUGHLIN GRAHAM DUPLEY MOORE

Address ~~20 CLIFFORD ROAD~~ See consent form  
BAILDON  
BRADFORD

Postcode BD17 5QH

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)

N/A - ONLY THE SERVICE OF MEALS AND SUPPLY OF ALCOHOL TO ADULTS

# 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	8.00	14.30	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)
Tue	8.00	14.30	
Wed	8.00	14.30	
	16.30	22.30	
Thur	8.00	14.30	
	16.30	22.30	
Fri	8.00	14.30	
	16.30	23.30	
Sat	8.00	14.30	
	16.30	23.30	
Sun	12.00	22.00	

## 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)

ALL HEALTH AND SAFETY REQUIREMENTS. EFFECTIVE MANAGEMENT AND CUSTOMER CONTROL. STAFF TRAINING ON ALCOHOL AND CUSTOMER SERVICE ✓

b) The prevention of crime and disorder

RESPONSIBLE SALE OF ALCOHOL I.E. ASKING FOR IDENTIFICATION FOR PROOF OF AGE, NOT SELLING TOO MUCH TO ONE INDIVIDUAL ETC. ✓

c) Public safety

NOTHING REQUIRED BEYOND EXISTING HEALTH AND SAFETY/FIRE SAFETY ETC REQUIREMENTS

d) The prevention of public nuisance

AS STATED IN BOX B AND ENSURES THAT STEPS ARE TAKEN TO ENSURE THAT CUSTOMERS LEAVE IN A ORDERLY UNPROBING MANNER ✓

e) The protection of children from harm

EXISTING HEALTH AND SAFETY/FIRE SAFETY REQUIREMENTS MONITORING SALES TO ENSURE NO ALCOHOL IS GIVEN TO CHILDREN

- 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

Please tick ✓

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input 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 27-9-07

Capacity PARTNER

**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 27-9-07

Capacity PARTNER

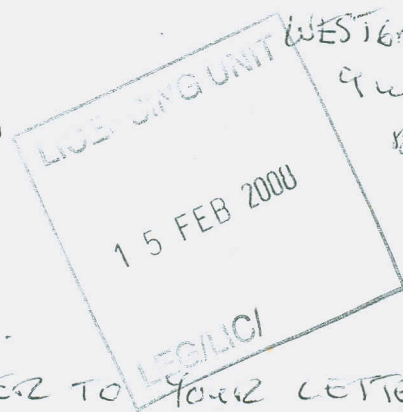
<b>Contact Name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 19)</b>	
<b>Post town</b>	<b>Post code</b>
<b>Telephone number (if any)</b>	
<b>If you would prefer us to correspond with you by e-mail, your e-mail address (optional)</b>	

APPENDIX 2  
COOL BEANS  
PUBLIC

15. 2. 2008

Your REF

LEC/LIC/1111



WESTGATE HOUSE

9 WESTGATE

BAILDON

BD17 5EH

MRS. MCGURK.

I REFER TO YOUR LETTER DATED

13 FEBRUARY.

THE POINT PERHAPS I SHOULD HAVE MADE REGARDING THIS APPLICATION IS THAT I LIVE AT OR SHOULD I SAY ABOVE COOL BEANS SO THIS APPLICATION DIRECTLY EFFECTS MY "LIFE STYLE" IN MANY WAYS NOISE BEING ONE SMALL PART OF THIS PLUS ALL THE OTHER "GOING ON" REGARDING THE HABITS OF DRUNK PEOPLE NOW YOU MAY NOT BE ABLE TO "COMMENT ON MATTERS REGARDING OR RELATING TO THE LEASE" BUT I THINK I HAVE DEMONSTRATED GROUNDS FOR REFUSING THIS APPLICATION

John