

**REPRESENTATION FORM**

<b>Your name/organisation name/name of body you represent</b>	JULIE WILLIS
<b>Address of person/organisation making representation</b>	[REDACTED]
<b>Name of the premises you are making a representation about</b>	
<b>Address of the premises you are making a representation about</b>	OFF LICENCE JOHN STREET

<b>What are you making a representation about?</b>
Please indicate which part of the licence/certificate application you are making a representation about (E.g. terminal hours, music and dancing, operating schedule)
OPENING HOURS CONGESTION OF TRAFFIC

Your representation must relate to one of the four Licensing Objectives

<b>Licensing Objective</b>	<b>Please provide full details of your concerns regarding the application and include any evidence you may have in support of it. Please use separate sheets if necessary</b>
<b>To prevent crime and disorder</b>	OPENING HOURS 6AM-11PM. THIS IS A RESIDENTIAL STREET. MAY ATTRACT GROUPS OF
<b>Public safety</b>	YOUNG PEOPLE LEADING TO NOISE AND LITTER. ALREADY PARKING IS AN ISSUE. THE CAR PARK IS FOR
<b>To prevent public nuisance</b>	RESIDENTS ONLY – AND GETTING FROM ONE END OF THE STREET TO OTHER SOMETIMES CAUSES
<b>To protect children from harm</b>	CHAOS NO NEED FOR THIS – 2 SUPERMARKETS AND NEWSAGENT NEAR

<b>Please suggest any conditions that could be added to the licence to remedy your representation or other suggestions you would like the Licensing Sub Committee to take into account.</b>	
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