



Application for the review of a premises licence or club premises certificate 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 [REDACTED] _____

(Insert name of applicant)

apply for the review of a premises licence under section 51 / apply for the review of a club premises certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below (delete as applicable)

Part 1 – Premises or club premises details

Postal address of premises or, if none, ordnance survey map reference or description 10 24 WONFORD STREET WONFORD EXETER DEVON EX25DF	
Post town EXETER	Post code (if known) EX25DF

Name of premises licence holder or club holding club premises certificate (if known) HEAVITREE & WONFORD UNITED SERVICES CLUB VICTORY HALL
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Number of premises licence or club premises certificate (if known) NOT KNOWN
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Part 2 - Applicant details

I am

Please tick ✓ yes

1) an individual, body or business which is not a responsible authority (please read guidance note 1, and complete (A) or (B) below)



2) a responsible authority (please complete (C) below)

3) a member of the club to which this application relates (please complete (A) below)

(A) DETAILS OF INDIVIDUAL APPLICANT (fill in as applicable)

Please tick ✓ yes

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

Surname

First names

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Please tick ✓ yes

I am 18 years old or over

Current postal address if different from premises address

--	--

Post town

EXETER

Post Code

--

Daytime contact telephone number

--	--

E-mail address (optional)

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(B) DETAILS OF OTHER APPLICANT

Name and address
Telephone number (if any)
E-mail address (optional)

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address
Telephone number (if any)
E-mail address (optional)

This application to review relates to the following licensing objective(s)

- Please tick one or more boxes ✓
- 1) the prevention of crime and disorder
 - 2) public safety
 - 3) the prevention of public nuisance
 - 4) the protection of children from harm

Please state the ground(s) for review (please read guidance note 2)

NOISE & DISORDER

NUISANCE TO PUBLIC

LOUD MUSIC

BREACH OF HEALTH & SAFETY LAW - Not LAOS

OFFENSIVE LANGUAGE

SMOKING CLOSE TO MY PREMISES

PREVENTION OF & PROTECTION OF CHILDREN FROM HARM.

Please provide as much information as possible to support the application (please read guidance note 3)

CLIENTS USING THE CLUB CONTINUALLY OUTSIDE NEXT TO MY FENCE, ADJACENT TO OUR DRIVE. THEY SMOKE IN THIS AREA, WHICH IS OFTEN TIMES FLOATING INTO OUR HOME. THATS IF WINDOWS IN OUR HOME ARE OPEN!

THEY USE THE FIRE EXIT DOORS, WHICH ARE PROPPED OPEN 99% OF THE TIME THE CLUB IS OPEN. ALONG WITH THE WINDOWS ALSO OPENING TOWARDS OUR HOME.

THEY HAVE, MOST WEEKENDS, GROUPS, PARTIES/DISCO'S/ ~~OR~~ OR JUST VERY VERY LOUD MUSIC BLASTING OUT OF THE OPEN DOORS & WINDOWS!

OBVIOUSLY THIS IS ABSOLUTELY HORRENDOUS TO HAVE TO ENDURE. THIS BEHAVIOUR GOES ON ANY DAY OF THE WEEK, EVEN SUNDAYS!! THIS IS ACCOMPANIED BY THE SHOUTING/LAUGHING, SWEARING. ALL 11.5 FT FROM OUR HOME.

ON OCCASIONS, CHILDREN ARE IN ATTENDANCE AT

PARTIES/FUNCTIONS. THIS IS A PARTICULAR CONCERN AS THEY ARE OFTEN A NUISANCE, RUNNING AROUND OUR STREET, KNOCKING ON DOORS & RUNNING AROUND UNCHECKED.

AS A COMMUNITY WE LIVE IN DREAD OF THE CLUB BEING OPEN!! WE HAVE TO CLOSE OUR WINDOWS & DOORS TO PREVENT/FILTER SOME OF THE ASSAULT VIA NOISE & MUSIC.

~~WE~~ I HAVE BEEN INTO THE CLUB ON NUMEROUS OCCASIONS TO RAISE THESE ISSUES & CONCERNS WITH WHOEVER IS ON DUTY. MOST RECENTLY, SAT 16TH 7/22 PM I SPOKE TO REES WHO SAYS HE'S MANAGER. AND STILL, AS I WRITE THIS FORM, THE SITUATION IS THE SAME.

THIS CONTINUED BAD BEHAVIOUR IS CAUSING WIDESPREAD DISCOMFORT/ANGER/MENTAL HEALTH & PHYSICAL HEALTH ISSUES. CHILDREN IN THE NEIGHBOURHOOD ARE BEING SUBJECTED TO ALL THIS NOISE/SWEARING/LOUD MUSIC & GENERAL BAD BEHAVIOUR. THIS IS DAY & NIGHT...

ALSO PARENTS HAVE TO CLOSE WINDOWS.

SO THAT THEY DONT HEAR IT SO MUCH THE ISSUE OF GIGARETTE ENDS ALL OVER THE PATH IS ALSO AN ISSUE.

WE HAVE, LACK OF SLEEP BECAUSE OF PEOPLE LEAVING LATE AT NIGHT, HANGING AROUND TALKING & SMOKING & SHOUTING OUTSIDE OUR HOMES

Please tick ✓ yes

Have you made an application for review relating to the premises before

If yes please state the date of that application

Day	Month	Year

If you have made representations before relating to the premises please state what they were and when you made them

Please tick ✓

yes

- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate
- 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 3 – Signatures (please read guidance note 4)

Signature of applicant or applicant's solicitor or other duly authorised agent (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.**

Signature

[Redacted Signature]

Date

21st July 2022

Capacity

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6)

[Redacted Contact Name and Address]

Post town

EXETER

Post Code

[Redacted Post Code]

Telephone number (if any)

[Redacted Telephone Number]

If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)

[Redacted E-mail Address]

Notes for Guidance

1. A responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
2. The ground(s) for review must be based on one of the licensing objectives.
3. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
4. The application form must be signed.
5. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
6. This is the address which we shall use to correspond with you about this application.