FAREHAM BOROUGH COUNCIL

FORM FOR REPRESENTATIONS FROM RESPONSIBLE AUTHORITIES AND INTERESTED PARTIES

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

- Before completing this form please read the guidance notes on page 7.
- If you are completing this form by hand please write legibly inside the boxes in black ink and stay within the box provided.
- Once completed please send your representation form to The Licensing Officer at the relevant authority.

You may wish to keep a copy of the completed form for your records.

I/We wish to make a representation(s) (Insert your name)

regarding the application for Premises Licence to be issued under the Licensing Act 2003, for the premises described in Part 1 below.

Part 1 – Premises or Club Premises Details

Postal address of premises or club premises, if any reference or description	/, or if none ordnance survey map
Post town	Post code

Name of premises licence holder or club holding club premises certificate (if known)

Number of premises licence or club premises certificate (if known)

Part 2 – Your Details

l am			Please tick	\checkmark		
1)	an inte	erested party				
	a)	a person living in the vicinity of the premises				
	b)	a body representing persons living in the vicinity of the premises				
	c)	a person involved in business in the vicinity of the premises				
	d)	a body representing persons involved in business in the vicinity of the premises				
2)	a resp	oonsible authority				
3)	a mer	ber of the club to which this application relates \Box				
(A)	REPR	EPRESENTEE DETAILS (fill in as applicable)				
Mr		Mrs Miss Ms	Other title (for example, Rev)			
Surname First names						
Arow	ou ove	sr 10		Yes		
Curre if diff	ent add erent fr ises ac	lress rom				
Post	Town	Postcode				
Conta	act tele	phone number in working hours				
Emai (optic	l addre onal)	SS				

Name and address

(C) **AUTHORITY APPLICANT**

Name and address

This application to review relates to the following licensing objective(s) Please tick one or more boxes \checkmark

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 representation (please read guidance note 1)

Please provide as much information as possible to support the representation (please read guidance note 2)

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

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE [AMOUNT], UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS REPRESENTATION

Part 3 – Signatures (please read guidance note 3)

Signature of representee or representee's solicitor or other duly authorised agent. (please read guidance note 4). If signing on behalf of the representee, please state in what capacity.

Signature	
Date	
Capacity	
Contact name (where not previously given) and address with this representation (please read guidance note 5)	ss for correspondence associated
Post town	Post code

NOTES FOR GUIDANCE

- 1. The ground(s) for representation must be based on one of the licensing objectives.
- 2. Please list any additional information or details, for example dates of problems which are included in the grounds for representation if available.
- 3. The representation form must be signed.
- 4. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 5. This is the address which we shall use to correspond with you about this application.

DATA PROTECTION ACT 1998

The personal information you have provided, or which has been obtained from other sources, will only be used for the purpose of the licensing function, and for auditing, monitoring, statistical and other research.

The information may be shared with other council departments and statutory bodies. The licence holder will also be provided with a copy of your representation.