

Report of:	Meeting	Date	Item No.
Michael Ryan Corporate Director of People and Places	Licensing Committee	29 October 2015	5

<p><b>Application for a new premises licence for a Co-operative convenience store, Preesall</b></p>
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**1. Purpose of report**

- 1.1 To provide members with information to assist them at a hearing to determine an application for a new premises licence under the Licensing Act 2003 for a Co-operative Convenience store, to be situated at Sandy Lane, Preesall, FY6 0EJ.

**2. Outcome**

- 2.1 Determination of the application made for a Co-operative Convenience store.

**3. Recommendation**

- 3.1 That members consider the application for a new premises licence for a convenience store, to be situated at Sandy Lane, Preesall, FY6 0EJ.

**4. Background**

- 4.1 The store is planned to be situated on Sandy Lane, Preesall on land which is currently vacant. The land was formerly a Lancashire County Council depot and is now derelict. Please refer to **Appendices 1 and 2**. There is a One Stop Convenience store approximately 5 minutes' walk from the site, on Sandy Lane which allows for the sale of alcohol 06:00 to 22:00 Monday to Sunday and opening/closing time 06:00 to 23:00.
- 4.2 Planning permission for a convenience store on the site was granted in September 2015, with operating hours of 07:00 to 22:00 Monday to Sunday. Conditions regarding deliveries were also placed on the permission, to reflect neighbourhood concerns.

- 4.3** Members may note that if a restriction on hours of operation exists for a premise, any subsequent licence granted under the Licensing Act 2003 will not override the planning permission granted.
- 4.4** Since the adoption of the Police Reform and Social Responsibility Act in 2012, the term 'interested party' has been removed from the Licensing Act 2003. There will no longer be a "vicinity" test; instead anyone "likely to be affected by the application" will be able to make representations either for, or against an application. However, any such objection must still relate to one or more of the licensing objectives and must not be frivolous or vexatious.

S182 Guidance at paragraph 9.9 also provides the following:

*It is recommended that, in borderline cases, the benefit of the doubt about any aspect of a representation should be given to the person making that representation. The subsequent hearing would then provide an opportunity for the person or body making the representation to amplify and clarify it.*

- 4.5** One representation has been received during the 28 day representation period. The representation has been received from Mrs Trudy Greenwood, whose property is situated to the boundary of the playing fields, to the rear of the proposed site.

The representation makes reference to the provision of alcohol in relation to youths and anti-social behaviour in the area of the playing fields, adjacent to Mrs Greenwood's house. Please refer to **Appendix 1**.

A check of Wyre ASB records indicates that one incident of anti-social behaviour in the playing fields has been reported to the Council, in May 2014.

## **5. Key issues and proposals**

- 5.1** An application for a premises licence was received on 7 September 2015 that seeks to permit the sale of alcohol for consumption off the premises (off sales) from a Co-operative convenience store. **See Appendix 3**  
The application requests the following:-

### **Supply of alcohol off the premises**

Monday to Sunday 06:00 to 23:00

The applicant has selected not to offer opening hours on the application, as there are no licensable activities taking place outside of the hours above. For an internal plan of the store please refer to **Appendix 4**.

- 5.2** The application has been correctly advertised on the premises and in the newspaper, as required by the Licensing Act 2003.

- 5.3** One relevant representation has been received within the 28 day representation period and this can be seen as **Appendix 5**.

The representation states:

“I wish to object to the application for a liquor licence at the proposed convenience store on sandy lane, Preesall. We live adjacent to the playing field which backs onto the site for the new store.

The local youths gather on weekend nights and there is a history of drinking and loud behaviour on the field. They do not need even easier access to alcohol to further fuel exuberance.”

- 5.4** No representations or additional conditions have been received from any of the Responsible Authorities.

- 5.5** As members can see from the application form the applicant has offered the following conditions to be included on the licence, if granted. These conditions are in addition to the mandatory conditions required under the Act.

#### **Prevention of Crime and Disorder**

1. The premises shall maintain a CCTV system which gives coverage of all entry and exit points. The system shall continuously record whilst the premises are open and conducting licensable activities. All recordings shall be stored for a minimum period of 28 days and shall be capable of being easily downloaded. Recordings shall be made available upon the receipt of a request by an authorised Officer of the Police or the Local Authority.
2. There shall be “CCTV in Operations” signs prominently displayed at the premises.
3. An incident log (whether kept in a written or electronic form) shall be retained at the premises and made available to an authorised Officer of the Police or the Local Authority.
4. The premises shall operate a proof of age scheme, such as Challenge 25, whereby the only forms of acceptable identification shall be either a photographic driving licence, a valid passport, military identification or any other recognised form of photographic identification incorporating the PASS logo, or any other form of identification from time to time approved by the Secretary of State.
5. The premises will be fitted with a burglar alarm system.
6. The premises will be fitted with a panic button system for staff to utilise in the case of an emergency.

### **Public safety**

1. The premises licence holder shall ensure that the appropriate fire safety and health and safety regulations are applied at the premises.

### **The prevention of public nuisance**

1. A complaints procedure will be maintained, details of which will be made available in store and upon request.

### **The protection of children from harm**

1. All staff will receive comprehensive training in relation to age restricted products and in particular, the sale of alcohol. No member of staff will be permitted to sell age restricted products until such time as they have successfully completed the aforementioned training.
2. An age till prompt system will be utilised at the premises in respect of age restricted products.
3. A refusals register (whether kept and written or in electronic form) will be maintained at the premises and will be made available for inspection upon request by an authorised Officer of the Police or the Local Authority.

- 5.6** This application has been brought before members to determine, in the light of the representation received.

<b>Financial and legal implications</b>	
Finance	There are no financial implications directly associated with this application.
Legal	The hearing should be conducted following the principles of natural justice. Any decision of the licensing Committee can be the subject of an appeal to the Magistrates Court.

### **Other risks/implications: checklist**

There are significant implications arising from this report on the issues marked with a ✓ below. The report author has consulted with the appropriate specialist officers on those implications, which are addressed in the body of the report and are taken account of in the recommendations made. There are no significant implications arising directly from this report, for those issues marked with an x.

Risks/implications	✓ / x
community safety	✓
equality and diversity	x
sustainability	x
health and safety	x

Risks/Implications	✓ / x
asset management	x
climate change	x
data protection	x

report author	telephone no.	email	date
Christa Ferguson	01253 887476	christa.ferguson@wyre.gov.uk	14/10/15

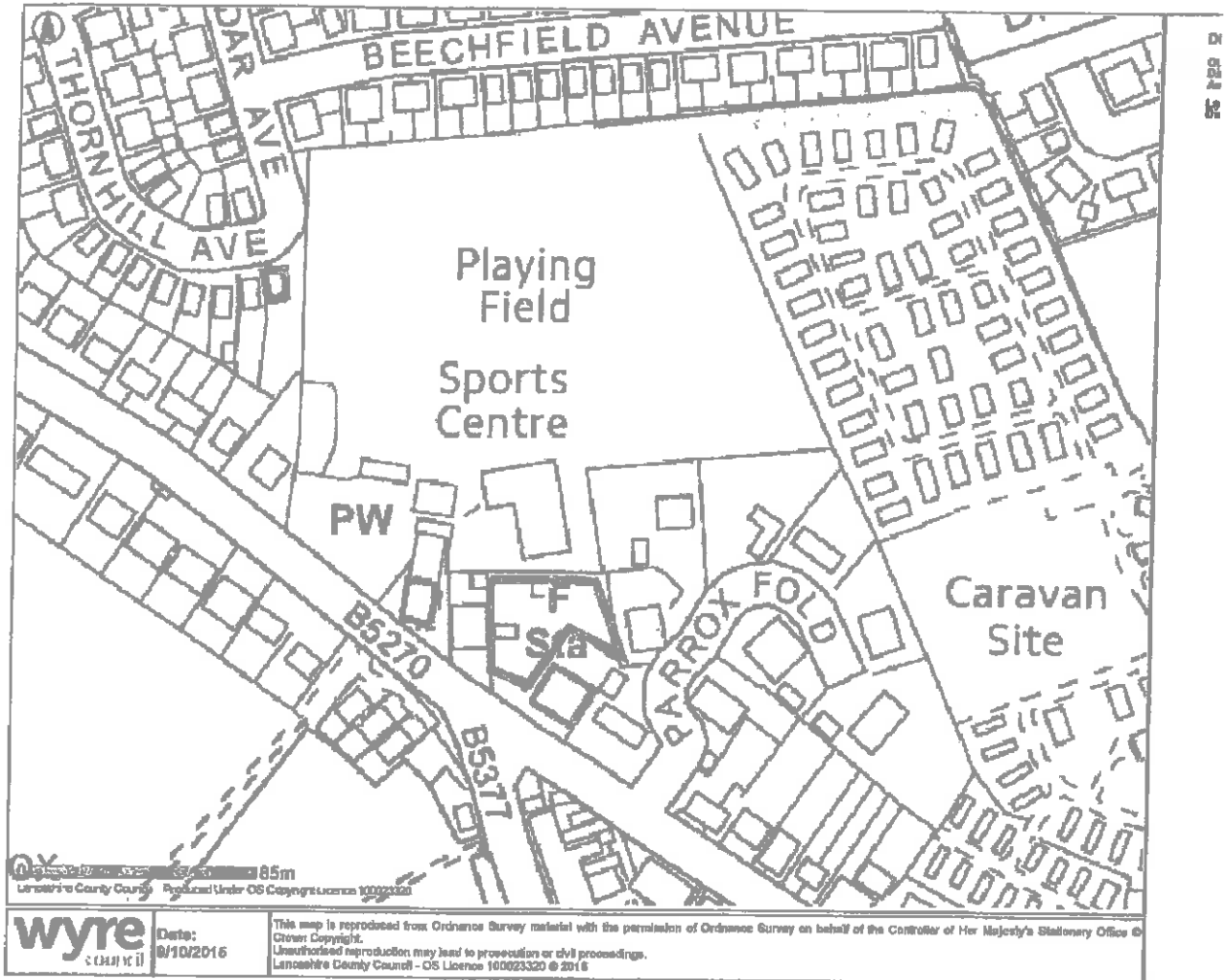
List of background papers:		
name of document	date	where available for inspection
Wyre Council Statement of Licensing Policy	January 2011	Licensing Section

List of appendices

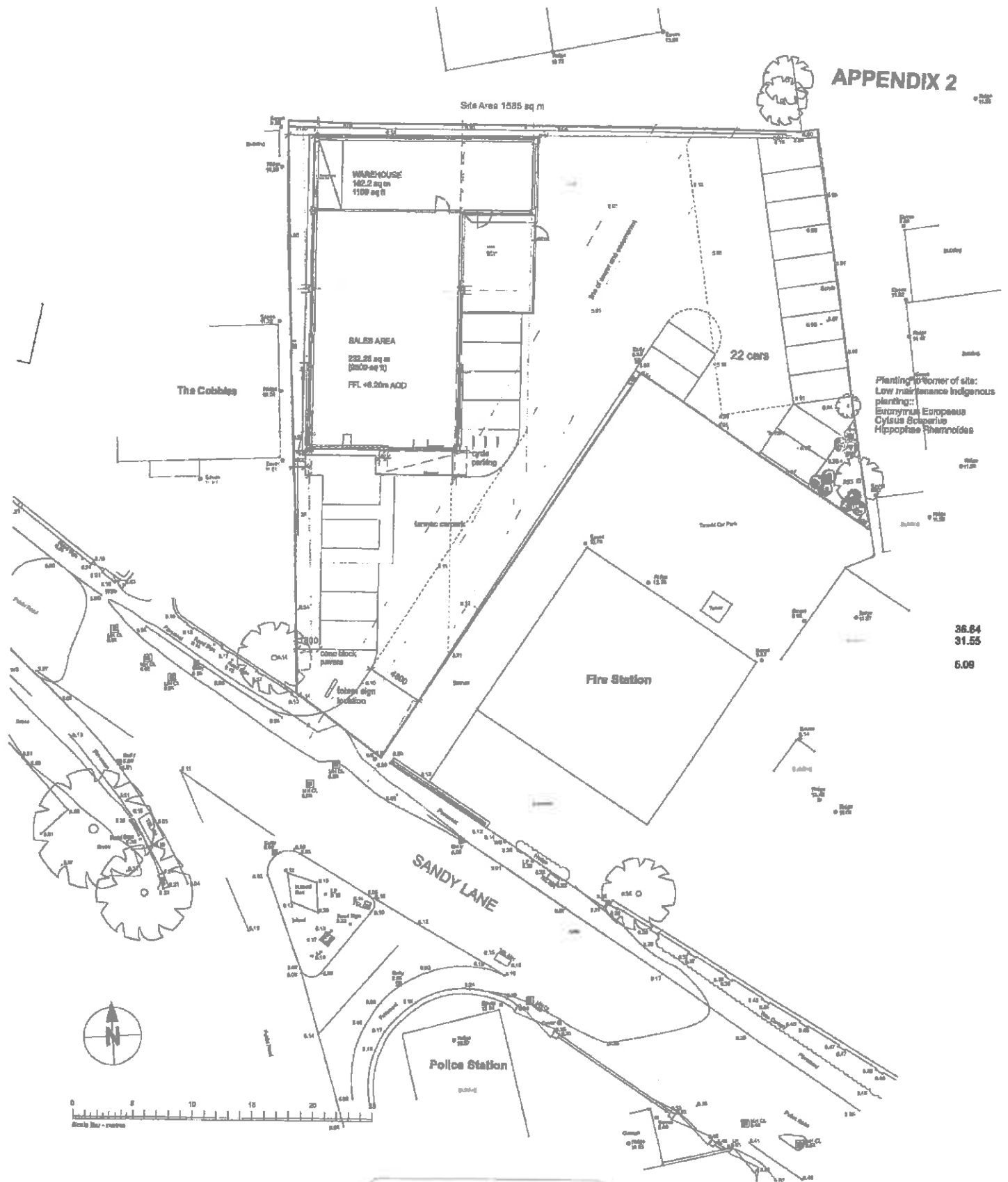
- Appendix 1- General location plan
- Appendix 2- Location plan
- Appendix 3- Application form (blank pages removed)
- Appendix 4- Internal plan
- Appendix 5- Representation

arm/rg/lic/cr/15/2910cf1


APPENDIX 1



# APPENDIX 2



**APPROVED**

Project	CONVENIENCE STORE FORMER HIGHWAYS DEPOT SANDY LANE PRESBALA FIFE BSJ		Drawing Title	PROPOSED SITE PLAN		
Client	RAMDON INVESTMENTS LTD		Drawing No	14019 P102	REV	
Status	PLANNING APPLICATION DRAWING		 Damson Consultancy Limited The Station Leven Road Leven, Fife KY11 3JG 01334 411100 www.damsonconsultancy.com			
Scale	1:200	Dwg Size				A2
Drawn	TH	Date				31.3.16

**APPENDIX 3**

**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 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/We** Co-operative Group Food Ltd

*(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 Co-operative Food Premises to be located on Vacant Land at Sandy Lane, Preesall			
Post town	Knott End, Lancashire	Postcode	FY6 0EJ
Telephone number at premises (if any)			
Non-domestic rateable value of premises		New Build - £315.00 fee provided	

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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 in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> 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 the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.**

Name Co-operative Group Food Ltd
Address Dept 10227 1 Angel Square Manchester M60 0AG
Registered number (where applicable) IP26715R
Description of applicant (for example, partnership, company, unincorporated association etc.) Company
Telephone number (if any)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Proposed convenience retail store, to trade 7 days a week, selling groceries, sundry items and alcohol for consumption off the premises only.

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 Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any that apply

- 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) performances 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 late night refreshment** (if ticking yes, fill in box I)

**Supply of alcohol** (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

**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	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption</b> - please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>			
				Off the premises	<input checked="" type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)  None					
Mon	06:00	23:00						
Tue	06:00	23:00						
Wed	06:00	23:00						
Thur	06:00	23:00						
Fri	06:00	23:00						
Sat	06:00	23:00						
Sun	06:00	23:00						
						<b>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		

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

Name Stuart McMillan
Blackpool Lancashire
Postcode
Personal licence number (if known)
Issuing licensing authority (if known) Blackpool Council

K

**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).**

None

L

<b>Hours premises are open to the public Standard days and timings (please read guidance note 6)</b>			<b><u>State any seasonal variations</u></b> (please read guidance note 4)
Day	Start	Finish	
Mon			<p><b><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u></b> (please read guidance note 5)</p> <p>At the discretion of the licence holder</p>
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

**M Describe the steps you intend to take to promote the four licensing objectives:**

**a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)**

The applicant has given thought to the potential impact of the grant of this application on the four licensing objectives and, having regard to the locality, considers that the following conditions are appropriate.

**b) The prevention of crime and disorder**

1. The premises shall maintain a CCTV system which gives coverage of all entry and exit points. The system shall continually record whilst the premises are open and conducting licensable activities. All recordings shall be stored for a minimum period of 28 days and shall be capable of being easily downloaded. Recordings shall be made available upon the receipt of a request by an authorised Officer of the Police or the Local Authority.

2. There shall be "CCTV in Operation" signs prominently displayed at the premises.

3. An incident log (whether kept in a written or electronic form) shall be retained at the premises and made available to an authorised Officer of the Police or the Local Authority.

4. The premises shall operate a proof of age scheme, such as a Challenge 25, whereby the only forms of acceptable identification shall be either a photographic driving licence, a valid passport, military identification or any other recognised form of photographic identification incorporating the PASS logo, or any other form of identification from time to time approved by the secretary of the state.

5. The premises will be fitted with a burglar alarm system

6. The premises will be fitted with a panic button system for staff to utilise in the case of an emergency.

**c) Public safety**

The premises licence holder shall ensure that the appropriate fire safety, and health and safety regulations are applied at the premises.

d) The prevention of public nuisance

A complaints procedure will be maintained, details of which will be made available in store and upon request.

e) The protection of children from harm

1. All staff will receive comprehensive training in relation to age restricted products and in particular the sale of alcohol. No member of staff will be permitted to sell age restricted products until such time as they have successfully completed the aforementioned training.

2. An age till prompt system will be utilised at the premises in respect of age restricted products.

3. A refusals register (whether kept and written or electronic form) will be maintained at the premises and will be made available for inspection upon request by an authorised Officer of the Police or the Local Authority

**Checklist:**

**Please tick to indicate agreement**

- 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 designated 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 SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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	<i>Ward Hadamy</i>
Date	4 September 2015
Capacity	Solicitor acting on behalf of the applicant



**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	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13) Mrs Cheryl Scott Ward Hadaway Sandgate House 102 Quayside			
Post town	Newcastle	Postcode	NE1 3DX
Telephone number (if any)	0191 204 4365		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) Cheryl.scott@wardhadaway.com			

#### Notes for Guidance

1. Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

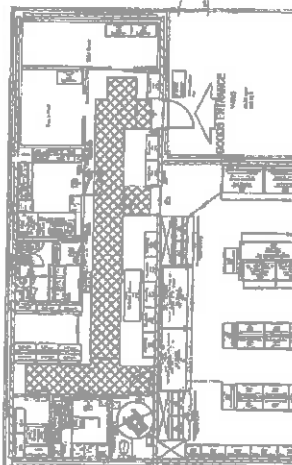
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

APPENDIX 4

ORDNANCE SURVEY MAP (NTS)

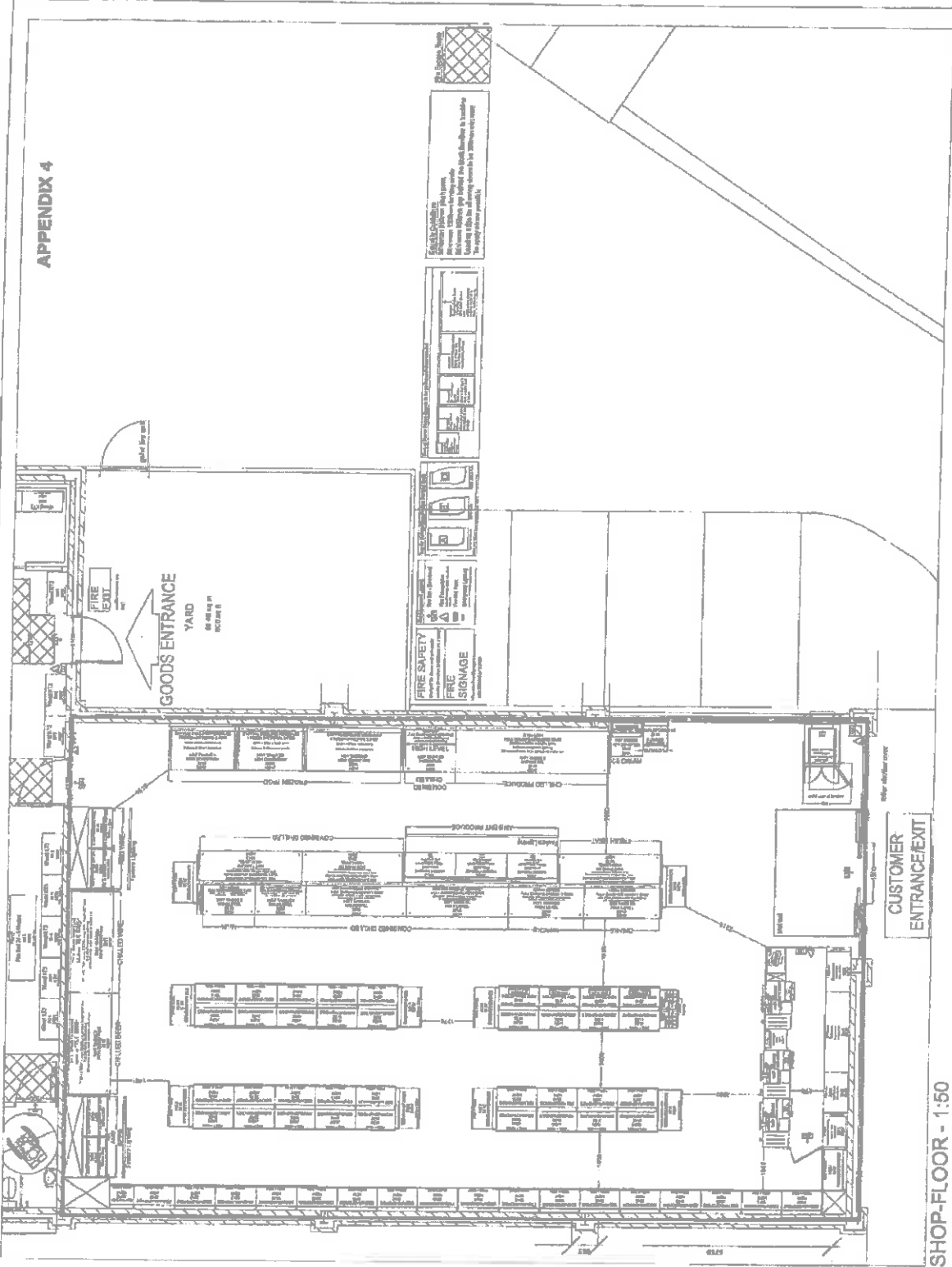
Licensed Area

ELEVATIONS 1:200



BACK OF HOUSE - 1:100

Scale of Drawing: 1:100  
Scale of Photo: GENERAL



SHOP-FLOOR - 1:50

Name of Applicant: THE CO-OPERATIVE FOOD 155, NEWINGTON GREEN, LONDON N16 9JH Tel: 020 883 3777 Fax: 020 883 3777	Date of Submission: 15/05/2015	Name of Applicant: THE CO-OPERATIVE FOOD 155, NEWINGTON GREEN, LONDON N16 9JH Tel: 020 883 3777 Fax: 020 883 3777		Name of Applicant: THE CO-OPERATIVE FOOD 155, NEWINGTON GREEN, LONDON N16 9JH Tel: 020 883 3777 Fax: 020 883 3777	
		Name of Applicant: THE CO-OPERATIVE FOOD 155, NEWINGTON GREEN, LONDON N16 9JH Tel: 020 883 3777 Fax: 020 883 3777			
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Planning Department  
 Applications Officer: [Name]  
 Tel: [Number]  
 Fax: [Number]  
 Email: [Address]  
 Date: 15/05/2015  
 Ref: [Reference Number]

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**From:** John & Trudy Greenwood <[REDACTED]>  
**Sent:** 02 October 2015 13:03  
**To:** Licensing & Health and Safety  
**Subject:** Proposed Convenience store Sandy lane Preesall

Sent from my iPad

I wish to object to the application for a liquor licence at the proposed convenience store on Sandy Lane, Preesall. We live adjacent to the playing field which backs onto the site for the new store. The local youths gather on weekend nights and there is a history of drinking and loud behaviour on the field. They do not need even easier access to alcohol to further fuel exuberance.

Trudy Greenwood

[REDACTED]  
Preesall