



**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.

We Herefordshire Council as the Licensing Authority

*(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**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b>	
<b>Royal National College for the Blind The Point 4 and Gardner Hall Venns Lane</b>	
<b>Post town</b> Hereford	<b>Post code (if known)</b> HR1 1DT

<b>Name of premises licence holder or club holding club premises certificate (if known)</b>
<b>Royal National College Enterprises Royal National College For The Blind College Road Hereford Herefordshire HR1 1EB</b>

<b>Number of premises licence or club premises certificate (if known)</b>
<b>PR01499</b>

**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**

Please tick ✓ yes

**I am 18 years old or over**

**Current postal address if different from premises address**

**Post town**

**Post Code**

**Daytime contact telephone number**

**E-mail address (optional)**

**(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 <b>Herefordshire Council as the Licensing Authority 8 St Owens Street Hereford HR1 2PJ</b>
Telephone number (if any)
E-mail address (optional) <b>licensing@herefordshire.gov.uk</b>

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

- 1) the prevention of crime and disorder
- 2) public safety
- 3) the prevention of public nuisance
- 4) the protection of children from harm

Please tick one or more boxes ✓

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

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

On the evening of Saturday 29<sup>th</sup> June 2019 the Out of Hours Noise team which included the principal licensing officer witnessed noise emanating for the premises which constituted a statutory nuisance.

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

On Saturday 29<sup>th</sup> June 2019 the Principal Licensing Officer was part of the Out of Hours noise team together with an Environmental Health Officer. They received a number of complaints from residents of Admiral Close, Hereford. Admirals Close is to the south of Gardner Hall and in close proximity to the rear grounds of Gardner Hall.

The officers who attended could see that there was a function taking place and that the doors and windows to the rear of Gardner Hall were open. They could hear loud music coming from the premises and also could hear people laughing and shouting.

The terminal hour for Licensable Activities was Midnight but the music continued to play. At 1207 the DJ was heard to say OK just one more and proceeded to playing 'Sweet Caroline'.

From their investigation both officers were satisfied that a Statutory Noise Nuisance took place and a Notice will be served concerning this in relation to this.



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

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**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, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**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



.....

Date **11.7.19**

.....

Capacity **Principal Licensing Officer**

.....

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

**Post town**

**Post Code**

**Telephone number (if any)**

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



### **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.