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HAMPSHIRE CONSTABULARY

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**APPLICATION FOR THE REVIEW OF A PREMISES LICENCE OR CLUB
PREMISES CERTIFICATE UNDER THE LICENSING ACT 2003**

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

Please tick

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other title (e.g. Rev):
Surname:		First Names:		
I am 18 years old or over		Please tick yes <input type="checkbox"/>		
Current postal address if different from premises address:				
Post town:		Postcode:		
Daytime telephone number:				
E-mail address: (optional)				

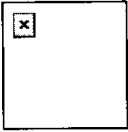
B - DETAILS OF OTHER APPLICANT

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other title (e.g. Rev):
Surname:		First Names:		
Current postal address if different from premises address:				
Post town:		Postcode:		
Daytime telephone number:				
E-mail address: (optional)				

C - DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other title (e.g. Rev): Sgt.
Surname: Adams		First Names: Tim		
Current postal address if different from premises address:				
Post town: Hythe		Postcode: SO43 6WY		
Daytime telephone number: 08450 454545 ext. 679-174				
E-mail address: (optional) western.licensing@hampshire.pnn.police.uk				

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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 Timothy Mark ADAMS on behalf of Hampshire Constabulary
(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**
(Select as applicable)

Part 1 – Premises or Club Premises details

Postal address of premises or, if none, ordnance survey map reference or description: McColls 3-7 Fleming Avenue North Baddesley		
Post town:	Romsey	Postcode (if known): SO52 9EJ
Name of premises licence holder or club holding club premises certificate (if known) Martin McColl LTD		
Number of premises licence or club premises certificate (if known) TVBC\PREM-LIC\153		

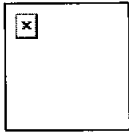
Part 2 – Applicant Details

I am

Select as appropriate

- 1) An interested party *(please complete (A) or (B) below)*
- 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 responsible authority *(please complete (C) below)*
- 3) A member of the club to which this application relates *(please complete (A) below)*

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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

Select one or more boxes

-

Please state the ground(s) for review *(please read guidance note 1)*

Hampshire Constabulary seek a review of the premises as we feel there are serious shortcomings in the management and day to day running of the store which undermine the Licensing Objectives namely:

Lack of effective staff training

Defective CCTV system and failure to adhere to Data Commissioners Code of Practice in relation to use of CCTV

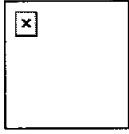
Designated Premises Supervisor not being in effective day to day control.

Poor record keeping of incidents and refusals for age related product sales.

Use of un-registered security staff.

In addition breaches of specific offences under the Licensing Act were also disclosed during visits to the store.

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

In summary Hampshire Police seek a review on the following grounds which are evidenced in detail on the attached report.

Staff Training - no evidence of satisfactory staff training. Training records not properly kept.

CCTV - System defective and no effective procedures in place in relation to use and retention of tapes.

DPS - Employee's working hours do not allow her to be in effective day to day control of the premises.

Record keeping - No incident book and poor record keeping of refused sales.

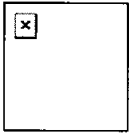
Security Staff - Employment of non SIA registered security staff.

Offences under S57 Licensing Act 2003.

Have you made an application for review relating to these premises before: Yes No

If yes please state the date of that application: / /
 Day Month Year

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

Please tick

- 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

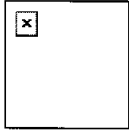
IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 3 – Signatures *(please read guidance note 3)*

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

Signature: _____
 Date: _____
 Capacity: _____

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Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)

Sgt T.M. Adams
Hampshire Constabulary
Western OCU Licensing Team
PO Box 263

Post town:	Hythe	Postcode:	SO45 6WY
Telephone Number:	08450454545 Ext 679-172		
E-mail Address: (optional)	western.licensing@hampshire.pnn.police.uk		

NOTES FOR GUIDANCE

1. The ground(s) for review 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 review if available.
3. The application 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.

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