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 Graham Metcalfe

(Insert name of applicant)

apply for the review of a premises licence under section 51 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, of description Rainbow Tavern 32 Highgate	ordnance survey map reference or
Post town Kendal	Post code (if known) LA9 4SX

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

Mr Andrew Hartley Schofield

Number of premises licence or club premises certificate (if known PL(A)0675

Part 2 - Applicant details

l a	am Please tick	
1)	an interested party (please complete (A) or (B) below)	yes
	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	
	 a body representing persons involved in business in the vicinity of the premises 	
2)	a responsible authority (please complete (C) below)	\boxtimes

 a member of the club to which this application relates (please complete (A) below) 				
(A) DETAILS OF INDIVIDUAL APPLIC	ANT (fill in as applicable)			
Please tick Mr	Ms D Other title (for example, Rev)			
Surname	First names			
l am 18 years old or over	Please tick yes			
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 env)
Telephone number (if any)
E-mail address (optional)

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address Graham Metcalfe Environmental Health Officer South Lakeland District Council Lowther Street Kendal LA9 4DQ

Telephone number (if any) 01539 793415

E-mail address (optional) g.metcalfe@southlakeland.gov.uk

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

	1)) the	prevention	of crime	and	disorde
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- 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 1) The Licensing objective for Public Nuisance is not being met.

For a number of months the Council Environmental Health Department has been investigating excessive noise nuisance at weekends from live singers and Karaoke at the Rainbow Tavern together with patrons in the adjacent beer garden and recently the alleyway shouting and screaming. This has been affecting a number of people at two residential properties every Friday, Saturday and Sunday evening. Please provide as much information as possible to support the application (please read guidance note 2)

On the 23rd of December 2014 myself and Tony Houlihan met with Mr Schofield Premise Licence Holder and Sara Kendrick (manager) to discuss ongoing noise complaints and to offer advice about sound insulation and monitoring of noise at the site boundary.

On the 6th 7th 8th and 9th of February noise monitoring proved that a statutory nuisance was occuring through music and people using the beer garden adjacent to a residential property. The recordings proved noise could be heard from karaoke and live music within the complainants bedroom together with people shouting and laughing in the beer garden.

On the 16th of February, I spoke with Sara about the recordings made and potential solutions that should be examined to reduce noise breakout and improve insulation. Concerns were raised about doors being opened into the beer garden. I explained that advice should be sought from an audio acoustician.

On the 20th February 2015 a Noise Abatement Notice was served on Mr Schofield and Sara preventing the use of the beer garden in the evenings and to prevent noise nuisance from live and amplified music. The covering letter explained the reasoning behind the serving of the Abatement Notice.

On the 26th of February 2015 I met Mr Schofield and Sara and explained that complaints were still on going with regards to the music emanting from the Tavern at weekends and noise from people congregating under the archway outside the entrance. The beer garden now closed to patrons after 10pm. Suggestions to improve sound insulation again reiterated to Mr Schofield.

During March furthur noise recordings were made which highlighted that noise of patrons outside in the alleyway were a problem together with music.

On the 27th of March 2015 I had a meeting with Mr Schofield and Sara to explain that the Council were still receiving complaints and to discuss potential solutions.

On the 11th of April 2015 weekend monitoring in person at the complainants property and in the beer garden and street concluded that noise from patrons and music to be at levels breaching the Noise Abatement Notice.

Please tick yes

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

If yes please state the date of that application

Da	ay	Мо	nt	h	Ye	ar	

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

Please	tick	yes
ole	\bowtie	

- 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 21 st April 2015

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Capacity EHO

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