

Licensing Act 2003

Representation on a Licensing Application

Representations may be made at any time during a period of 28 consecutive days starting on the day after the application was given to the Licensing Authority.

In the case of a closure order issued by the Police, representations may be made during the seven days that follow relevant notice being given to the Local Authority by the Magistrates Court, starting on the day after the day the notice was received.

Representations must be relevant to the application. To be relevant they must relate to at least one of the four **Licensing Objectives** listed below:

- **The Prevention of Crime and Disorder**
- **Public Safety**
- **Prevention of Public Nuisance**
- **The Protection of Children from Harm**

Note: Please be aware that that this form cannot be treated as confidential. Your representation will be passed to the Applicant or to the representative of the Applicant to allow them the opportunity of addressing your concerns. This form will also be published on the council's website and read out in public at the sub-committee hearing.

☒ **By ticking this box, I agree to my contact details being made public.** (Please note if you do not wish for your information to be made public, your representation may not be accepted or requested that it be withdrawn). Email addresses and contact telephone numbers will not be publicly available.

Please enter your details below. If you wish for the notice of hearing to be sent via email please enter your email address and tick the box below. If you do not have an email all correspondence will be sent via post.

Name:	GAIL LUKEHURST
Telephone:	[REDACTED]
Email address:	[REDACTED]

Please tick this box if you consent to any notice of any hearing being sent to you to the e-mail address provided by you above. ☒

If you wish to withdraw any representations you may do so confirming this in writing to the address given below, providing you do so no later than 24 hours before the any hearing, or otherwise orally at the hearing.

Please tick this box if you **do not** intend to attend or be represented at any hearing ☐

Signed: [REDACTED]

Print Name: G. LUKEHURST

Date: 21/11/24



Licensing Act 2003
Representation on a Licensing Application

Please provide your details below

Your Name:	GAIL LUKEHURST
Postal address including postcode:	LIDGETT HOUSE ROOKERY ROAD HEALING DN41 7PR
Telephone Number	
Email Address	
<p>Are you:</p> <ul style="list-style-type: none"> • An individual? <input checked="" type="checkbox"/> • A person who operates a business? • A person representing residents or businesses? • A member of the relevant licensing authority (ie, elected councillor of the licensing authority)? 	
If you are representing a resident or business please provide details	

Please provide details of the application to which you wish to make a representation.

Name of Applicant	HEALING & DISTRICT SOCIAL CLUB
Address of Premises	1-2 ROOKERY ROAD HEALING DN41 7PS
Application Details	SALE OF ALCOHOL EXTENSION OF HOURS FRI-SAT 0900-0100 LIVE MUSIC (INDOORS) LIVE & RECORDED MUSIC (OUTDOORS)

Last date for representation (if known)	
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Please give details of your representation in the box below. Indicate which of the Licensing Objectives your representation refers to by ticking the relevant box/es:

- **The Prevention of Crime and Disorder**
- **Public Safety**
- **Prevention of Public Nuisance**
- **The Protection of Children from Harm**

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

Your representation must relate to one of the four licensing objectives, which are detailed below. Please detail the evidence supporting your Representation and the reason for your representation. If necessary, separate sheets may be used.

Objectives	Evidence
The Prevention of Crime and Disorder	
Public Safety	<p>I AM RELUCTANT TO HAVING MY CONTACT DETAILS MADE PUBLIC DUE TO POSSIBLE INTIMIDATION BY HOSTILE CLUB MEMBERS. THE LADY AT NO. 5 HAS ALREADY SEEN EVIDENCE OF THIS VIA SOCIAL MEDIA WHEN MENTIONING THE PLANS ON FACEBOOK. I LIVE ALONE & NEED TO FEEL SAFE AT HOME.</p>
Prevention of Public Nuisance	<p>NOISE POLLUTION PREVIOUS LIVE MUSIC EVENTS ON A SATURDAY EVENING HAVE BEEN EXCESSIVELY LOUD. LIVING DIRECTLY OPPOSITE THE FRONT OF THE CLUB DOORS & WINDOWS LEFT OPEN AT ALL HOURS TO ALLOW MUSIC NOISE TO TRAVEL. I SLEEP IN FRONT BEDROOM/HOUSE SET BACK FROM ROAD BUT WITH WINDOWS SHUT & EAR PLUGS IN.</p>
The Protection of Children from Harm	

I AM NOT SURE WHY EXTENSION OF HOURS WOULD BE WANTED BY ANY RESIDENTS, DUE TO CLOSE PROXIMITY OF HOUSES TO THE CLUB. THE BEER GARDEN NEXT TO GARDENS. THE COTTAGE ADJOINING THE CLUB HAS BEEN UP FOR SALE SINCE MAY/JUNE AND AM CERTAIN THE CLUB IS A FACTOR IN IT NOT SELLING ANY OUTDOOR MUSIC SHOULD NOT BE PERMITTED AT ANY TIME. RESIDENTS DESERVE THE RIGHT TO SIT OUT IN GARDENS AND NOT BE BLASTED WITH LOUD MUSIC

REDUCTION IN MUSIC LEVEL	VOLUME CONTROL TO ALLOW LOCAL RESIDENTS TO SLEEP
SOUNDPROOFING	BETTER PROTECTION TO SURROUNDING PROPERTY WINDOWS & DOORS CLOSED AT APPROPRIATE TIME

If possible please suggest alterations to the application that would resolve the problem mentioned above, again paying attention to the licensing objectives

Once the Licensing Section has received this form you will receive a written acknowledgment and you may be contacted to discuss the issue prior to any referral to a sub-committee hearing.

Please return this form to the following address:

The Licensing Manager, Doughty Road Depot, Doughty Road, Grimsby, DN32 0LL
licensing@nelincs.gov.uk

Telephone: 01472 326299