



**Report of: Service Director - Public Protection**

| Meeting of              | Date         | Agenda Item | Ward(s)       |
|-------------------------|--------------|-------------|---------------|
| Licensing Sub-Committee | 8 April 2014 |             | Finsbury Park |

|                       |  |            |
|-----------------------|--|------------|
| Delete as appropriate |  | Non-exempt |
|-----------------------|--|------------|

**Subject: TEMPORARY EVENT NOTICE APPLICATIONS**

**RE: Islington Link Up, 48 Seven Sisters Road, Islington, London, N7 6AA.**

## **1. Synopsis**

- 1.1 This is a hearing to determine a Temporary Event Notice (TEN) in respect of the above premises to extend the terminal hour for licensable activities from 22:00 to 05:00 on 28 – 29 June 2014. The temporary event notice is applied for under section 100, Part 5 of the Licensing Act 2003.
- 1.2 This application was subject to a representation from the Metropolitan Police and the Council's Noise Team.
- 1.3 The Licensing Sub-Committee are asked to consider whether or not to authorise the TEN. The TEN, if authorised, would be subject to the current premises licence conditions.

## **2. Recommendations**

- 2.1 To determine the temporary event notice under Part 5 of the Licensing Act 2003 as the Licensing Sub-Committee consider appropriate for the promotion of the Licensing Objectives.
- 2.2 The Committee can decide to:
  - i. allow the TEN for the specified event,
  - ii. allow the TEN, subject to modification on timings only.
  - iii. prohibit the TEN by way of a counter notice.

**3. Background**

- 3.1 The premises does not have a licence and operates during the day as a community centre.
- 3.2 Papers are attached as follows:
  - Appendix 1: TEN applications;
  - Appendix 2: representations from Metropolitan Police and Council Noise Team;
  - Appendix 3: map of premises location.

**4. Conclusion and reasons for recommendations**

- 4.1 The Council is required to consider this TEN and decide to grant or refuse the application only.

**Background papers:**

The Council's Statement of Licensing Policy  
Licensing Act 2003  
Secretary of States Guidance

Final Report Clearance

**Signed by**

  
Service Director - Public Protection

Date 3/4/14

**Received by**

Head of Scrutiny and Democratic Services

Date

Report author: Licensing

Tel: 020 7527 3031

Fax: 020 7527 3430

E-mail: [licensing@islington.gov.uk](mailto:licensing@islington.gov.uk)



# ISLINGTON

## Temporary Event Notice

Before completing this notice please read the guidance notes at the end of the notice. If you are completing this notice by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written or typed in black ink. Use additional sheets if necessary.

You should keep a copy of the completed notice for your records. You must send at least one copy of this notice to the licensing authority and additional copies must be sent to the chief officer of police and the local authority exercising environmental health functions for the area in which the premises are situated. The licensing authority will give to you written acknowledgement of the receipt of the notice.

I, the proposed premises user, hereby give notice under section 100 of the Licensing Act 2003 of my proposal to carry on a temporary activity at the premises described below.

| 1. The personal details of premises user (Please read note 1)   |  |
|---|--|
| 1. Your name  |  |
| Title   | Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state) |
| Surname   | RILEY  |
| Forenames   | Desmond  |
| 2. Previous names (Please enter details of any previous names or maiden names, if applicable. Please continue on a separate sheet if necessary) |  |
| Title   | Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)            |
| Surname   |  |
| Forenames   |  |
| 3. Your date of birth   |  |
| 4. Your place of birth  |  |
| 5. National Insurance Number  |  |
| 6. Your current address (We will use this to correspond with you unless you complete the separate correspondence box below)                     |  |
| [REDACTED ADDRESS]  |  |
| E-Mail Address (if available)   |  |

ISLINGTON COUNCIL LICENSING

|          |         |          |         |
|----------|---------|----------|---------|
| Date     | 28/3/10 | Fee Paid | 21-00   |
| Category |         |          |         |
|          |         |          | CASH    |
|          |         |          | 0672505 |

5 201

|  |          |
|--|----------|
| 8. Alternative address for correspondence (If you complete the details below, we will use this address to correspond with you) |          |
|  |          |
| Post town  | Postcode |
| 9. Alternative contact details (if applicable)   |          |
| Telephone numbers:<br>Daytime  |          |
| Evening (optional)   |          |
| Mobile (optional)  |          |
| Fax number (optional)  |          |
| E-Mail Address<br>(if available)   |          |

|   |  |
|---|--|
| <b>2. The premises</b>  |  |
| Please give the address of the premises where you intend to carry on the licensable activities or if it has no address give a detailed description (including the Ordnance Survey references)<br>(Please read note 2) |  |
| 48 Seven Sisters Road<br>Islington<br>London N7 6AA   |  |
| Does a premises licence or club premises certificate have effect in relation to the premises (or any part of the premises)? If so, please enter the licence or certificate number below.                              |  |
| Premises licence number   |  |
| Club premises certificate number  |  |
| If you intend to use only part of the premises at this address or intend to restrict the area to which this notice applies, please give a description and details below.<br>(Please read note 3)                      |  |
|   |  |
| Please describe the nature of the premises below. (Please read note 4)  |  |
| Community centre Hall   |  |

Please describe the nature of the event below. (Please read note 5)

Fund Raising event

**3. The licensable activities**

Please state the licensable activities that you intend to carry on at the premises (please mark an "X" next to the licensable activities you intend to carry on). (Please read note 6)

|  |                                     |
|--|-------------------------------------|
| The sale by retail of alcohol  | <input type="checkbox"/>            |
| The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club | <input checked="" type="checkbox"/> |
| The provision of regulated entertainment   | <input checked="" type="checkbox"/> |
| The provision of late night refreshment  | <input checked="" type="checkbox"/> |
| Are you giving a late temporary event notice? (Please read note 7)                           | <input type="checkbox"/>            |

Please state the dates on which you intend to use these premises for licensable activities. (Please read note 8)

28-29 June 2014

Please state the times during the event period that you propose to carry on licensable activities (please give times in 24 hour clock). (Please read note 9)

10-5 AM

Please state the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers. (Please read note 10)

50-60

|  |                       |                                     |
|--|-----------------------|-------------------------------------|
| If the licensable activities will include the supply of alcohol, please state whether the supplies will be for consumption on or off the premises, or both (please mark an "X" next to the appropriate box). (Please read note 11) | On the premises only  | <input checked="" type="checkbox"/> |
|  | Off the premises only | <input type="checkbox"/>            |
|  | Both                  | <input type="checkbox"/>            |

**4. Personal licence holders (Please read note 12)**

Do you currently hold a valid personal licence? (Please mark an "X" in the box that applies to you)

Yes  No

If "Yes" please provide the details of your personal licence below.

|                              |  |
|------------------------------|--|
| Issuing licensing authority  |  |
| Licence number               |  |
| Date of issue                |  |
| Date of expiry               |  |
| Any further relevant details |  |


| <b>5. Previous temporary event notices you have given (Please read note 13)</b>   |                                 |   |
|---|---------------------------------|---|
| Have you previously given a temporary event notice in respect of any premises for events falling in the same calendar year as the event for which you are now giving this temporary event notice?<br>(Please mark an "X" in the box that applies to you)                        | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| If answering yes, please state the number of temporary event notices you have given for events in that same calendar year   |                                 |   |
| Have you already given a temporary event notice for the same premises in which the event period:<br>a) ends 24 hours or less before; or<br>b) begins 24 hours or less after<br>the event period proposed in this notice?<br>(Please mark an "X" in the box that applies to you) | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |

| <b>6. Associates and business colleagues (Please read note 14)</b>  |                                 |   |
|---|---------------------------------|---|
| Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?<br>(Please mark an "X" in the box that applies to you)   | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| If answering yes, please state the total number of temporary event notices your associate(s) have given for events in the same calendar year.   |                                 |   |
| Has any associate of yours already given a temporary event notice for the same premises in which the event period:<br>a) ends 24 hours or less before; or<br>b) begins 24 hours or less after<br>the event period proposed in this notice?<br>(Please mark an "X" in the box that applies to you) | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| Has any person with whom you are in business carrying on licensable activities given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice? (Please mark an "X" in the box that applies to you)                      | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| If answering yes, please state the total number of temporary event notices your business colleague(s) have given for events in the same calendar year.  |                                 |   |


|   |                                 |   |
|---|---------------------------------|---|
| Has any person with whom you are in business carrying on licensable activities already given a temporary event notice for the same premises in which the event period:<br>a) ends 24 hours or less before; or<br>b) begins 24 hours or less after<br>the event period proposed in this notice?<br>(Please mark an "X" in the box that applies to you) | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
|---|---------------------------------|---|

| <b>7. Checklist (Please read note 15)</b>  |                                     |
|--|-------------------------------------|
| I shall (Please mark the appropriate boxes with an "X")  |                                     |
| Send at least one copy of this notice to the licensing authority for the area in which the premises are situated   | <input checked="" type="checkbox"/> |
| Send a copy of this notice to the chief officer of police for the area in which the premises are situated  | <input checked="" type="checkbox"/> |
| Send a copy of this notice to the local authority exercising environmental health functions for the area in which the premises are situated                                | <input checked="" type="checkbox"/> |
| If the premises are situated in one or more licensing authority areas, send at least one copy of this notice to each additional licensing authority                        | <input type="checkbox"/>            |
| If the premises are situated in one or more police areas, send a copy of this notice to each additional chief officer of police  | <input type="checkbox"/>            |
| If the premises are situated in one or more local authority areas, send a copy of this notice to each additional local authority exercising environmental health functions | <input type="checkbox"/>            |
| Make or enclose payment of the fee for the application   | <input checked="" type="checkbox"/> |
| Sign the declaration in Section 9 below  | <input checked="" type="checkbox"/> |

| <b>8. Condition (Please read note 16)</b>   |
|---|
| It is a condition of this temporary event notice that where the relevant licensable activities described in Section 3 above include the supply of alcohol that all such supplies are made by or under the authority of the premises user. |

| <b>9. Declarations (Please read note 17)</b>   |   |
|--|---|
| The information contained in this form is correct to the best of my knowledge and belief.  |   |
| I understand that it is an offence:  |   |
| (i) to knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on conviction for such an offence to a fine up to level 5 on the standard scale; and                                |   |
| (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on conviction for any such offence to a fine not exceeding £20,000, or to imprisonment for a term not exceeding six months, or to both. |   |
| Signature  |  |
| Date   | 28 March 2014   |
| Name of Person signing   | Desmond Riley   |

For completion by the licensing authority

| 10. Acknowledgement (Please read note 18)             |  |
|---|--|
| I acknowledge receipt of this temporary event notice. |  |
| Signature   | <br>On behalf of the licensing authority |
| Date  | 28/03/2014   |
| Name of Officer signing                               | A FITZSIMONS   |



**Islington Licensing Authority  
Licensing Act 2003**

**REPRESENTATION FORM FROM RESPONSIBLE AUTHORITIES IN RESPECT OF A  
TEMPORARY EVENT NOTICE**

|  |                                  |
|--|----------------------------------|
| <b>Your Name</b>                           | Paul HOPPE PC 208NI              |
| <b>Responsible authority and job Title</b> | Licensing Police Officer         |
| <b>Postal and email address</b>            | 222 UPPER STREET<br>LONDON<br>N1 |

|  |  |
|--|--|
| <b>Name of the premises you are making a representation about</b>                                      | Community Centre   |
| <b>Address of the premises you are making a representation about</b>                                   | 48 SEVEN SISTERS ROAD N7 6AA                                 |
| <b>Date and times of notice</b>  | 28 <sup>th</sup> – 29 <sup>th</sup> June 2014<br>2200 - 0500 |
| <b>Normal or Late TEN<br/>(if representation is for a late TEN then counter notice will be issued)</b> | NORMAL   |

**This representation relates to the following licensing objective(s)**

Please tick one or more boxes

- |   |                                     |
|---|-------------------------------------|
| 1) the prevention of crime and disorder | <input checked="" type="checkbox"/> |
| 2) public safety                        | <input type="checkbox"/>            |
| 3) the prevention of public nuisance    | <input type="checkbox"/>            |

**Recommended actions to promote the licensing objectives:**

- |   |                                     |
|---|-------------------------------------|
| 1) The following conditions of the premises licence, as detailed below, be imposed                            | <input type="checkbox"/>            |
| 2) The TEN be modified as follows:  | <input type="checkbox"/>            |
| 3) Additional information needs to be supplied by applicant:  | <input type="checkbox"/>            |
| 4) The responsible authority considers that the notice should be refused by the Council's Licensing Committee | <input checked="" type="checkbox"/> |

**Annex 1 conditions (please specify)**



Annex 2 conditions (please specify)

Annex 3 conditions (please specify)

Suggested modifications (for example times, dates, capacity)

***Please detail the evidence supporting your representation and / or the reason for your representation. Please use separate sheets if necessary***

***I have read a report from, and spoken directly to the Noise Liaison Officer who attended this venue on 30<sup>th</sup> March 2014 during a TEN, after a number of resident complaints over excessive noise. The behaviour of the applicant and DJ towards the Council Officer during the TEN is not in keeping with the Licensing Objective of Prevention of Crime and Disorder. The Noise Liaison Officer also states that the event overran by at least 30 minutes, but because of the behaviour of the applicant she had to withdraw, so it could have been longer. For these reasons I am objecting to this TEN and recommend that the Committee refuse this application.***

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please send this form along with any additional sheets to the applicant. A copy should be sent to: Islington Council, Licensing Team, 222 Upper Street London N1 1XR or email to [licensing@islington.gov.uk](mailto:licensing@islington.gov.uk)

**This form must be returned within the Statutory Period. For more details please check with the Licensing Team on 020 7527 3031**

**To be completed and returned by applicant**

|   |  |
|---|--|
| <b>Name of the premises</b>                       |  |
| <b>Address of the premises</b>                    |  |
| <b>Date and times of proposed temporary event</b> |  |

|   |
|---|
| <p>1) I am happy to accept the representation and conditions/modifications recommended by the responsible authority <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2) I wish to withdraw my application for a temporary event notice <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3) I do not accept the suggested conditions or recommendations and I wish to proceed with the notice to the next available Licensing Sub Committee <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Signed: _____ Date: _____</p> <p>Print name: _____</p> |
|---|

A copy should be sent by post to: Islington Council, Licensing Team, 222 Upper Street London N1 1XR or email to [licensing@islington.gov.uk](mailto:licensing@islington.gov.uk)

**This form must be returned within 5 working days.**

**Applicants are encouraged to enter into negotiations and supply additional information to the relevant responsible authority, where appropriate prior to formally returning this notice.**

**For more details please check with the Licensing Support Team on 020 7527 3031**



## Forde, Niall

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**From:** Forde, Niall  
**Sent:** 02 April 2014 15:39  
**To:** Licensing  
**Subject:** FW: Temporary Event Notice: 48 Seven Sisters Road

FYI

---

**From:** Clift, Paul  
**Sent:** 01 April 2014 13:29  
**To:** Forde, Niall  
**Subject:** RE: Temporary Event Notice: 48 Seven Sisters Road

Hello Niall,

The Noise Team wish to object to this TEN on the grounds of potential public nuisance. Last weekend during an event at 48 Seven Sisters Road (with this applicant Desmond Riley in attendance), a Statutory Noise Nuisance was caused to neighbouring properties by the playing of loud amplified music. Council Officers attended on 3 occasions to discuss this with the DJ, Mr Riley & others at the venue which culminated in abusive and verbally aggressive behaviour (particularly from the DJ and Mr Riley).

The TEN was due to end at 5am but during the last visit at 5.15am council officers witnessed people still arriving at the venue and local residents reported that the event went on until approximately 8am.

Thanks, Paul.

**Paul Clift**  
**Principal Environmental Health Officer,**  
**Pollution Projects Team, Public Protection Division,**  
**Islington Council, Municipal Offices,**  
**222 Upper Street, London. N1 1XR.**  
**Tel: 020 7527 3199, Fax: 020 7527 3019 Alternative contact Savva Mina 020 7527 3215**

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---

**From:** Fitzsimons, Aiden  
**Sent:** Monday, March 31, 2014 03:47 PM GMT Standard Time  
**To:** LicensingPolice; Issues, Noise  
**Cc:** Brothers, Anne; Lane, Terrie; Forde, Niall  
**Subject:** Temporary Event Notice: 48 Seven Sisters Road

Dear PC,

We have received the following attached application for a **TEMPORARY EVENT NOTICE**:

Applicant Details: Desmond Riley

Premises: 48 Seven Sisters Road, London, N7 6AA

Date of Event: 28-29 June 2014

Timings of Event: 1000 to 0500

Received on: 28 March 2014

You have **3 WORKING DAYS** to submit a representation on the basis of any of the Licensing Objectives.

Regards

Aiden Fitzsimons

Technical Support Officer  
Licensing Team  
Public Protection Division  
Environment & Regeneration  
Islington Council  
3rd Floor, 222 Upper Street, London, N1 1XR  
Tel: 020 7527 3031

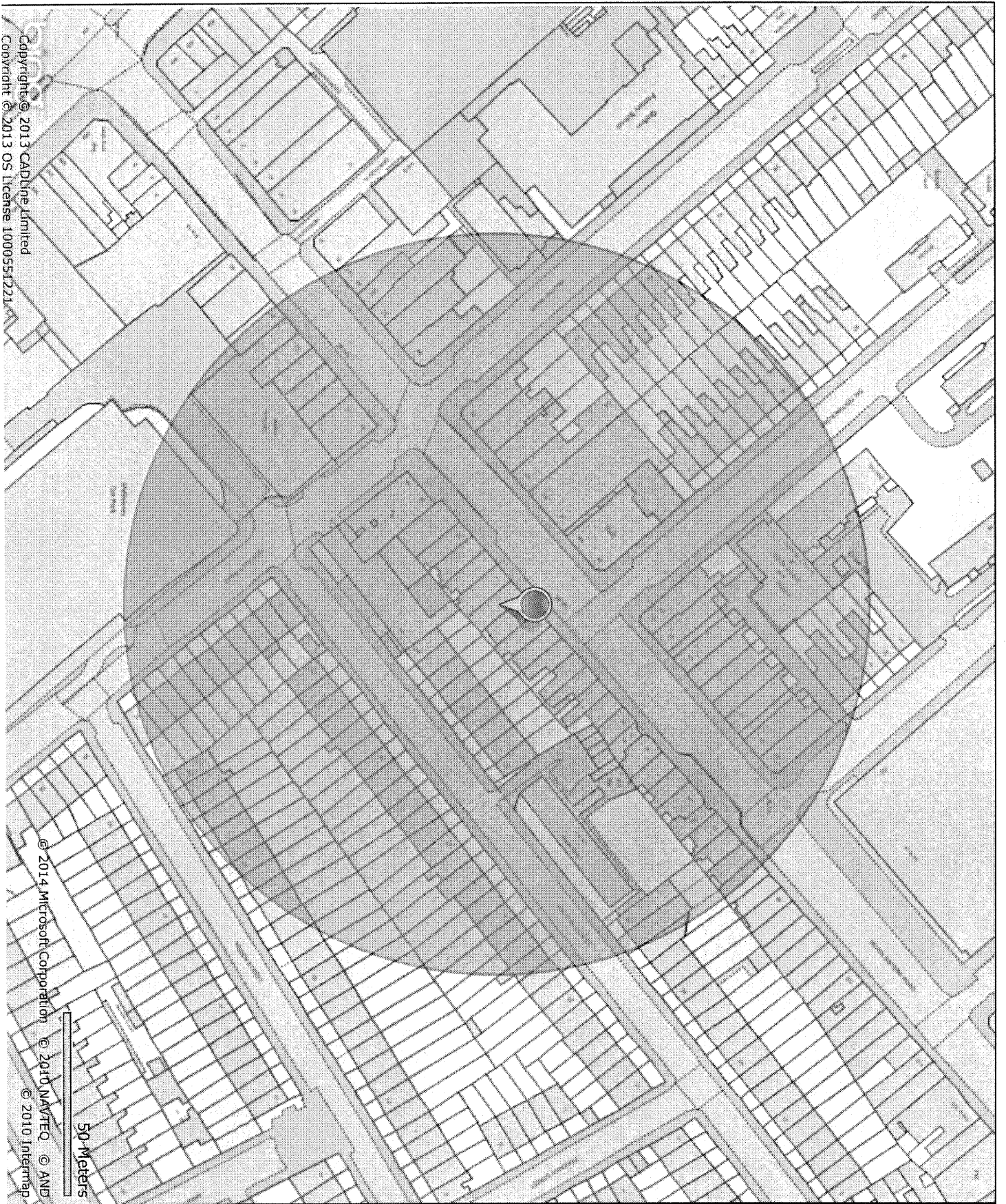
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