



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

Meeting of	Date	Agenda Item	Ward(s)
Licensing Sub-Committee	9 January 2013	B3	Bunhill

Delete as appropriate	Exempt	Non-exempt

**Subject: PREMISES LICENCE NEW APPLICATION**

**RE: THE GREAT WALL, 184-186 OLD STREET, LONDON EC1V 9FR**

## 1. Synopsis

- 1.1 This is an application for a new premise licence under the Licensing Act 2003.
- 1.2 The new application is to:
  - i) Supply alcohol for consumption on the premises from 11:00 to 23:00 Monday to Saturday and from 11:00 to 22:30 on Sunday;

## 2. Recommendations

- 2.1 To determine the application for a new premises licence under Section 19 of the Licensing Act 2003.
- 2.2 If the Committee grants the application it should be subject to:
  - i) conditions of the current premises licence;
  - ii) conditions prepared by the Licensing Officer which are consistent with the Operating Schedule
  - iii) conditions recommended by responsible Authorities
  - iv) any conditions deemed necessary by the Committee to promote the four licensing objectives.

### 3. Background

3.1 The premises does not currently hold a licence.

3.2 Papers are attached as follows:-

Appendix 1: application form;

Appendix 2a: name & address details of those persons making representations;

Appendix 2: representations;

Appendix 3: suggested conditions and map of premise location.

3.3 The Licensing Authority has received 2 letters of representation, 2 of which are from people who requested that they remain anonymous.

### 4. Planning Implications

4.1 There are no adverse implications for this application.

### 5. Conclusion and reasons for recommendations

5.1 The Council is required to consider this application in the light of all relevant information, and if approval is given, it may attach such conditions necessary to promote the licensing objectives.

#### 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 26/12/12

Received by

Head of Scrutiny and Democratic Services

Date

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WK/121366024

SLINGFORD COUNCIL LICENSING	
5/11/12	Fee Paid £315
Application No: 0662020	
Signature: <i>[Handwritten Signature]</i>	

Application for a premises licence to be granted 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/We THE GREAT WALL & CO LIMITED

*(Insert name(s) of applicant)*

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

**Part 1 – Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description			
THE GREAT WALL			
184-186 OLD STREET			
Post town	LONDON	Post code	EC1V 9FR

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£60000

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as  
Please tick yes

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)

*OK.  
16MT  
5 Nov 12*

- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS (fill in as applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	

<b>Current postal address if different from premises address</b>			
<b>Post Town</b>		<b>Postcode</b>	
<b>Daytime contact telephone number</b>			
<b>E-mail address (optional)</b>			

**(B) OTHER APPLICANTS**

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

<b>Name</b> THE GREAT WALL & CO LIMITED
<b>Address</b> REGISTERED OFFICE: 1 <sup>ST</sup> FLOOR ROOM L SOPHIA HOUSE 76-80 CITY ROAD LONDON EC1Y 2BJ
<b>Registered number (where applicable)</b> 08188398
<b>Description of applicant (for example, partnership, company, unincorporated association etc.)</b> COMPANY
<b>Telephone number (if any)</b> 0989 357790
<b>E-mail address (optional)</b>

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
0	4	12

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day	Month	Year
1	1	1

Please give a general description of the premises (please read guidance note 1)  
CHINESE RESTAURANT

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment**

**Please tick yes**

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

**Provision of entertainment facilities:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

**Provision of late night refreshment** (if ticking yes, fill in box L)

**Supply of alcohol** (if ticking yes, fill in box M)

**In all cases complete boxes N, O and P**

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Wed					
Thur					
			<b>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Fri					
Sat					
Sun					



**C**

<b>Indoor sporting events Standard days and timings (please read guidance note 6)</b>			<b><u>Please give further details</u></b> (please read guidance note 3)
<b>Day</b>	<b>Start</b>	<b>Finish</b>	
Mon			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Wed			
Thur			<b><u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)
Fri			
Sat			
Sun			

D

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 4)		
Wed					
Thur					
			<b><u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**G**

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

**H**

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment you will be providing</u></b>		
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)		
Fri					
Sat			<b><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sun					

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the facilities for making music you will be providing</u></b>	
			<b><u>Will the facilities for making music be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)	
Tue				
Wed			<b><u>State any seasonal variations for the provision of facilities for making music</u></b> (please read guidance note 4)	
Thur				
Fri			<b><u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)	
Sat				
Sun				

J

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick</b> (see guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
			<b><u>Please give a description of the facilities for dancing you will be providing</u></b>		
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed					
			<b><u>State any seasonal variations for providing dancing facilities</u></b> (please read guidance note 4)		
Thur			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Fri					
Sat					
Sun					



**K**

<b>Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)</b>			<b><u>Please give a description of the type of entertainment facility you will be providing</u></b>		
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u> (please read guidance note 2)</b>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u> (please read guidance note 3)</b>		
Wed					
Thur			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)</b>		
Fri					
Sat			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u> (please read guidance note 5)</b>		
Sun					

L

<b>Late night refreshment Standard days and timings (please read guidance note 6)</b>			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)</b>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>			
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					

**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption (Please tick box)</b> (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	11.00	23.00			
Tue	11.00	23.00			
Wed	11.00	23.00			
Thur	11.00	23.00			
Fri	11.00	23.00			
Sat	11.00	23.00			
Sun	11.00	22.30			
			<b>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		

**State the name and details of the individual whom you wish to specify on the licence as premises supervisor**

<b>Name</b> STEPHEN OLAFISOYE	
<b>Address</b> 57 ST ANN'S ROAD TOTTENHAM LONDON	
<b>Postcode</b>	N15 6NJ
<b>Personal Licence number (if known)</b> LN/000004475	
<b>Issuing licensing authority (if known)</b> HARINGEY COUNCIL	

**N**

**Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)**  
 NONE

**O**

<b>Hours premises are open to the public Standard days and timings (please read guidance note 6)</b>			<b><u>State any seasonal variations</u> (please read guidance note 4)</b>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	
Mon	08.00	23.30	<p><b><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 5)</b></p>
Tue	08.00	23.30	
Wed	08.00	23.30	
Thur	08.00	23.30	
Fri	08.00	23.30	
Sat	08.00	23.30	
Sun	09.30	23.00	

**P** Describe the steps you intend to take to promote the four licensing objectives:

**a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)**

1. Alcohol shall not be sold or supplied on the premises otherwise than to persons taking table meals there and for consumption by such a person as an ancillary to his meal.
2. Suitable Beverages other than alcohol (including drinking water) shall be equally available for consumption with or otherwise as an ancillary to meals served in the licensed premises

**b) The prevention of crime and disorder**

A Closed Circuit Television System will be installed and maintained on the premises. The CCTV system will be recording at all times when the premises are open and the recordings shall be kept for at least 31 days and made available to the police and council on request within 24 hours.

**c) Public safety**

Fire safety equipment will be checked regularly and any requirements made by the Fire Safety Officer will be complied with.

**d) The prevention of public nuisance**

Signs will be displayed at the exit reminding customers to leave quietly and respect the neighbours

**e) The protection of children from harm**

All staff will be trained that alcohol will only be sold to persons who can produce photographic identification where there is any doubt that they are over the age of 18.


Please tick yes

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable
- I understand that I must now advertise my application
- 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 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	3 <sup>rd</sup> November 2012
Capacity	AUTHORISED AGENT

**For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent.** (please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

<b>Contact name (where not previously given) and postal address for correspondence associated with this application</b> (please read guidance note 13)			
J & H LICENSING CONSULTANTS 35 WALFIELD AVENUE WHETSTONE			
Post town	LONDON	Post code	N20 9PS
Telephone number (if any)	0208 446 8643		
If you would prefer us to correspond with you by e-mail your e-mail address (optional) trev.jenny@btinternet.com			



## Representation 1

Dear Ms Tomashevski,

I wish to object to the council in relation to the application for a new premises licence at The Great Wall, 184-186 Old Street, London EC1V 9FR.

The application is to permit the premises to sell alcohol for consumption on the premises from Monday to Saturday 11:00 - 23:00 and Sunday 11:00 - 22:30.

Our representation relates to the following licensing objectives:

- \* the prevention of crime and disorder
- \* the prevention of nuisance

I live \_\_\_\_\_, therefore I feel I would be directly affected by the proposed operation of the premises due to the following issues:

- \* increased traffic of people in and out of the premises, their entrance being \_\_\_\_\_
- \* increased noise and nuisance due to the increase in pedestrian traffic
- \* increased period of noise and nuisance due to the extended opening hours proposed being until 23:00 Monday-Saturday and 22:30 Sunday

Currently the premises operates as a daytime cafe and takeaway closing in the afternoon around 4pm, which is an ideal situation for a building which is largely residential. The application to now sell food and alcohol for an extra 7 hours every day of the week would have an extremely detrimental effect on our personal lives due to the proximity of my windows.

This effect would be compounded by the location of the night bus stop \_\_\_\_\_, which already creates a nuisance for sleeping and could only be worsened by the increased numbers of people using the premises late into the night.

In addition, with the extension of hours and the introduction of alcohol, there may be the increased issue of smokers standing outside the building \_\_\_\_\_

\_\_\_\_\_ which will create further noise and nuisance; there is already a problem with the smell of cigarette smoke due to the location of the bus stop.

On a more general point, there are numerous bars and restaurants already in the local areas of Shoreditch and Clerkenwell between which we are sandwiched.

In the majority of these cases it appears there is office space above ground level which clearly does not present such a problem, and where it is residential above ground level the commercial ground floor operates only until the end of the working day. This seems to be a fair compromise.

However if the volume of commercial premises continues to rise disproportionately through planning decisions such as this, it will start to push the residents out of the area. In order to create vibrant neighbourhoods there must remain a balance of residential and commercial use.

I ask that my name, address and contact details be kept confidential in your report prepared for the Licensing Committee. I trust that the Committee will reach a decision



Representation 2

Dear Sirs,

This email summarises my objections to the application for a new licence at The Great Wall (184-186 Old Street London EC1V 9FR)

My flat is [redacted] and would be seriously affected by the new business proposal. The current ground floor space is occupied by a cafe and take-away which closes at 4pm. There is also an existing public house on the same side (it is the next building with a small alleyway

[redacted] As you may be aware from complaints to the Council over many years, there has been a continued problem with disorder, late night noise and unsocial behaviour around the building arising from the existing late licences.

My objection to the grant of the license centres on the prevention of nuisance and the prevention of crime and disorder. I will be adversely affected every day and every evening from the noise and disturbance from the extended hours proposed. The additional noise from the street at 11pm Monday to Saturday and 11:30 on Sunday will be intolerable. As residents we already have a significant problem with smokers congregating around the building (in the alley) and on many occasions, loud, drunken and unsocial behaviour in the late evenings in the alley and around the building, particularly at the doorway and I fear that this will get considerably worse if the licence is granted. We routinely hose down the alleyway to remove the unmentionable mess outside [redacted] that greets us on weekends when there are 'special' occasions.

Just the increased noise from people going in and out of the premises at night will seriously affect the quiet enjoyment of the residential accommodation directly above the premises. All of this is compounded by the bus stop outside our premises which will of course become much busier late at night when the premises empty, plus the noise and nuisance of additional cars, taxis etc picking up people late at night.

You will note that there are already many restaurants and pubs in the area, most of which have office space above which is of course unoccupied in the evenings. I understand that in this scenario, a late licence may be acceptable but [redacted] there is residential accommodation directly above the premises which needs to be taken into account as this type of licence poses a completely different and considerably elevated potential for nuisance, noise and drunken behaviour.

In the light of this situation and the existing late night problems which will only be worsened by this application, I urge you to reject this application entirely.

Finally, I would be grateful if you could withhold my personal details from the public record.

Thank you,

[redacted]


**Suggested conditions of approval consistent with the operating schedule**

1. CCTV shall be installed, operated and maintained in agreement with the Police. The system will enable frontal identification of every person entering the premises. The system shall record in real time and operate whilst the premises are open for licensable activities. The recordings shall be kept available for a minimum of 31 days. Recordings shall be made available to an Authorised Officer or a Police Officer (subject to the Data Protection Act 1998) within 24 hours of any request.
2. Fire safety equipment shall be checked regularly and any requirements made by the Fire Safety Officer will be complied with.
3. Signs shall be displayed at the exit reminding customers to leave quietly and respect the neighbours.
4. The licensee shall ensure that staff are trained about age restricted products and ensure that they sign to confirm that they have understood the training. The licensee shall keep records of training and instruction given to staff.
5. The licensee shall put arrangements in place to ensure that before serving alcohol to young persons, staff ask to see accredited proof of age cards e.g. Citizencard, a Passport, or UK Driving Licence bearing the photograph and date of birth of the bearer.



**Interactive Islington**

**Basement and Ground Floor Kersella House 184 - 186 Old Street EC1V 9FR**

 **ISLINGTON**

Scale: 1:415	Date: 19.11.2012
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