



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

Meeting of	Date	Agenda Item	Ward(s)
Licensing Sub-Committee	25 November 2014		Bunhill

Delete as appropriate		Non-exempt
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**Subject: PREMISES LICENCE NEW APPLICATION  
DISCO DOG, OLD STREET STATION, LONDON EC1Y 1BE**

## 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 08:00 to 23:30 on Monday to Saturday and 08:00 to 22:30 on Sunday;
  - II. Allow late night refreshment 23:00 to 23:45 Monday to Sunday.
  - III. Opening hours of the premises from 08:00:00 to 00:00 Monday to Saturday and from 08:00 to 23:00 on Sunday.

## 2. Relevant Representations

Licensing Authority	No
Metropolitan Police	Yes
Noise	Yes
Health and Safety	No

Trading Standards	Yes
Public Health	No
Safeguarding Children	No
London Fire Brigade	No
Local residents	Yes: 1 local resident
Other bodies	No:

### 3. Background

3.1 Papers are attached as follows:-

Appendix 1: application form and letter to residents;

Appendix 2: representations;

Appendix 3: suggested conditions and map of premises location.

3.2 The premises is unlicensed.

### 4. Planning Implications

4.1 The property was granted a certificate of lawfulness for change of use as a café/restaurant (A3) on 3 July 2014 with one restrictive condition regarding hours of use not operate except between the hours of 08:00hr and 00:00hr Monday - Saturday, and between 08:00hr and 23:00hr on Sunday and Bank Holidays.

### 5 Recommendations

5.1 To determine the application for a new premises licence under Section 17 of the Licensing Act 2003.

5.2 To consider that this address is in the Bunhill Saturation or "Cumulative Impact Policy" of Islington. This special policy creates a rebuttable presumption that applications for new premises licences, club premises certificates, or variation applications that are likely to add to the existing cumulative impact will normally be refused, unless the applicant can demonstrate why the operation of the premises involved will not add to the cumulative impact or otherwise impact adversely on the promotion of the licensing objectives.

5.3 If the Committee grants the application it should be subject to:

- i. conditions prepared by the Licensing Officer which are consistent with the Operating Schedule (see appendix 3)
- ii. any conditions deemed appropriate by the Committee to promote the four licensing objectives.(see appendix 3)

### 6 Conclusion and reasons for recommendations

6.1 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 as appropriate 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 13/11/14

**Received by**

Head of Scrutiny and Democratic Services

Date

Report author: Licensing Service

Tel: 020 75027 3031

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

WK/201462277.

LONDON BOROUGH OF ISLINGTON

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 JONA AHEARNE

*(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 <b>DISCO DOG, OLD STREET STATION</b>			
Post town	LONDON	Postcode	EC1Y 1BE
Telephone number at premises (if any)			
Non-domestic rateable value of premises	£0		

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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)

OK  
want  
7 Oct 14

- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)
- 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 in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England  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 checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b> AHEARNE			<b>First names</b> JONA		
I am 18 years old or over				<input checked="" type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**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)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town			Postcode		
<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.**

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
01	11	2014

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

DD	MM	YYYY

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

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 any that apply

- 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 late night refreshment** (if ticking yes, fill in box I)

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

**In all cases complete boxes K, L and M**

**A**

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play 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 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><u>Will the exhibition of films 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 exhibition of films</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>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</u></b> (please read guidance note 5)		
Sat					
Sun					

C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b>Please give further details</b> (please read guidance note 3)
Day	Start	Finish	
Mon			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 4)
Tue			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 4)
Wed			<b>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</b> (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b>Will the boxing or wrestling entertainment 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"/>				
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music 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"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Tue					
			<b>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</b> (please read guidance note 5)		
Wed					
Thur					
Fri					
Sat					
Sun					

**F**

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) AS PART OF THE OPERATION AS A RESTAURANT /OYSTER BAR		
Mon	08:00	23:45			
Tue	08:00	23:45			
Wed	08:00	23:45	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur	08:00	23:45			
Fri	08:00	23:45	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 (please read guidance note 5)		
Sat	08:00	23:45			
Sun	08:00	22:45			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of dance 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"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4)		
Tue					
			<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)		
Wed					
Thur					
Fri					
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)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b>Please give further details here</b> (please read guidance note 3)		
Wed					
Thur			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 4)		
Fri					
Sat			<b>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</b> (please read guidance note 5)		
Sun					

**I**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3) As part of the operation of a Restaurant/oyster bar		
Mon	23:00	23:45			
Tue	23:00	23:45	<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4)		
Wed	23:00	23:45			
Thur	23:00	23:45	<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)		
Fri	23:00	23:45			
Sat	23:00	23:45			
Sun	23:00	23:45			



**J**

<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</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	8:00	23:30			
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	08:00	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 designated premises supervisor:**

Name Jona Ahearne	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

K

**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

L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon	08:00	00:00	<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></b> (please read guidance note 5)</p>
Tue	08:00	00:00	
Wed	08:00	00:00	
Thur	08:00	00:00	
Fri	08:00	00:00	
Sat	08:00	00:00	
Sun	08:00	23:00	

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

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

Premises is located under the traffic island and prt of the Old Street underground station. Patrons and staff will need to be off of the premises before the station closes each night. Between 08:00 and 10:00 hours each day the alcohol will only be sold as ancillary to a meal. Alcohol will only be supplied for consumption off the premises with a meal.

The premises will be laid out to table and chair and other than an area in front of the bar all patrons will be seated with waiter and waitress service. Such other conditions as may be agreed with the responsible authorities.

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

See a above

**c) Public safety**

All appropriate risk assessments will be carried out

**d) The prevention of public nuisance**

See a above

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

CHALLENGE 25 AGE VERIFICATION POLICY IN PLACE

**Checklist:**

**Please tick to indicate agreement**

- 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 designated 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 SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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	<input checked="" type="checkbox"/> Recoverable Signature   X _____ Robert Sutherland consultant solicitor Signed by: robert.sutherland@keystonelaw.co.uk
Date	03/10/2014
Capacity	SOLICITOR AND AUTHORISED AGENT FOR AND ON BEHALF OF THE APPLICANT

**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.**

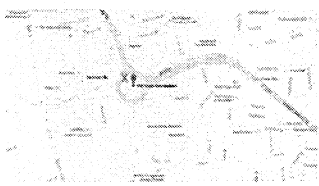
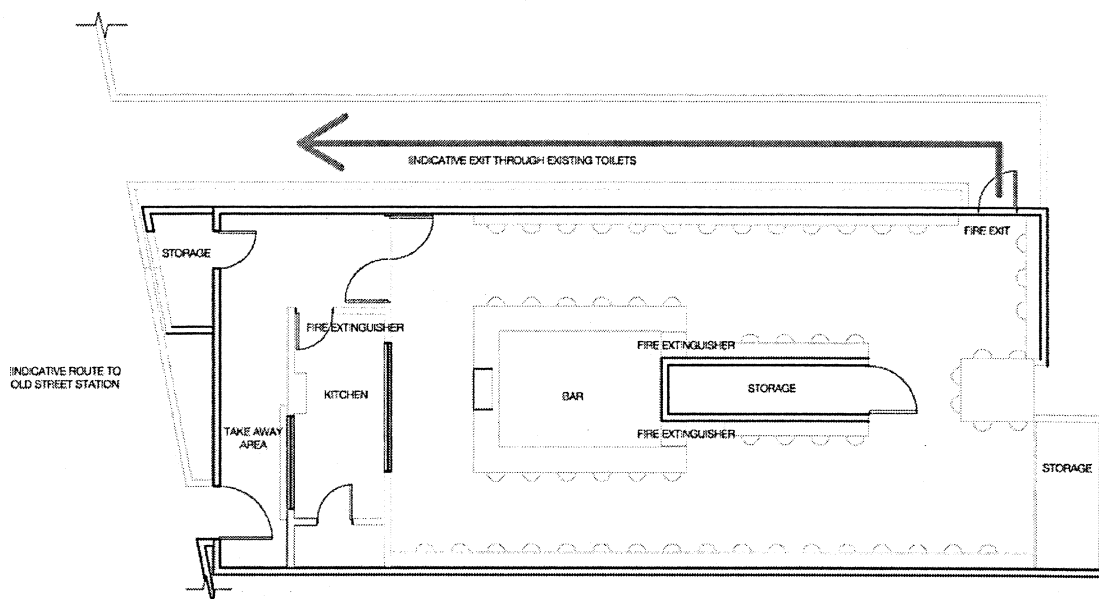
Signature	
Date	

Capacity	
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Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13) ROBERT SUTHERLAND KEYSTONE LAW 53 DAVIES STREET			
Post town	<b>LONDON</b>	Postcode	<b>WIK 5JH</b>
Telephone number (if any)	02071526550		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) robert.sutherland@keystonelaw.co.uk			

### Notes for Guidance

1. Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.



LOCATION MAP

**ATC**

@AN-ARCHITECTURE.CO.UK

(+44)7855807101

Proposed Plans for Disco Dogs Old Street

Consult Southshakers drawings for Bar Design

1:100@A4

Copyright © ATC - AN-Architecture



## Islington Licensing Authority Licensing Act 2003

### REPRESENTATION FORM FROM RESPONSIBLE AUTHORITIES

Responsible Authority Environmental Protection

<b>Your Name</b>	Anne Brothers	
<b>Job Title</b>	Noise Liaison Officer	
<b>Postal and email address</b>	222 Upper Street, London N1 1XR anne.brothers@islington.gov.uk	
<b>Contact telephone number</b>	020 7527 3047	
<b>Name of the premises you are making a representation about</b>	Disco Dog	
<b>Address of the premises you are making a representation about</b>	St Agnes Well, Old Street Station, London EC1Y 1BE	
<b>Which of the four licensing Objectives does your representation relate to?</b>	<b>Yes Or No</b>	<b>Please detail the evidence supporting your representation. Or the reason for your representation. Please use separate sheets if necessary</b>
To prevent public nuisance	Yes	Noise Team has been in receipt of calls in relation to noise nuisance affecting other businesses in close vicinity to the applicant's premises when TENs have been operating at ground floor levels on the roundabout. Noise Team has concerns about the effect of this business on others in close vicinity.
<b>Suggested conditions that could be added to the licence to remedy your representation or other suggestions you would like the Licensing Sub Committee to take into account. Please use separate sheets where necessary and refer to checklist.</b>	<ul style="list-style-type: none"> <li>• Alcohol shall only be sold as ancillary to a table meal at all times.</li> <li>• There shall be no vertical drinking.</li> <li>• Recorded music shall be restricted to ambient background levels of sound.</li> <li>• There shall be no off-sales of alcohol.</li> </ul>	

Signed: Anne Brothers

Date: 15 October 2017

Please return this form along with any additional sheets to: Licensing Support Team, Public Protection, 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 Support Team on 020 7527 3031**

Pollution Team  
222 Upper Street  
London N1 1XR

T 020 7527 3047

F 020 7527 3059

E [anne.brothers@islington.gov.uk](mailto:anne.brothers@islington.gov.uk)

W [www.islington.gov.uk](http://www.islington.gov.uk)

Our ref: abr/201462816

Your ref:

Robert Sutherland  
Keystone Law  
Via e mail to: [robert.sutherland@keystonelaw.co.uk](mailto:robert.sutherland@keystonelaw.co.uk)

This matter is being dealt with by:  
**Anne Brothers**

Date: 15 October 2014

Dear Mr Sutherland


**PREMISES LICENCE APPLICATION. DISCO DOG, ST AGNES WELL, OLD STREET STATION, LONDON EC1Y 1BE. LICENSING ACT 2003**

Please find attached a copy of the Pollution Team representation in respect of the above application.

The representation is self-explanatory.

If you have any queries regarding this please contact me at the above office.

Yours sincerely,



**Anne Brothers**  
**Principal Technical Officer**  
cc. Katie Tomashevski, Licensing Officer.



Your  
Our Licensing/NI/Objection  
Date: 2<sup>nd</sup> November 2014



**METROPOLITAN POLICE  
SERVICE  
Licensing Team  
Islington Police Licensing Unit  
Islington Police Station  
2 Tolpuddle Street  
London  
N1 0YY**

Telephone: 07799133204  
Facsimile:  
Email:  
licensingpolice@islington.gov.uk

Disco Dog  
Old Street Station  
EC1Y 1BE

Dear Sir

**Re: New Licence Application – DISCO DOG Old Street Station EC1y 1BE**

With reference to the above application, I am writing to inform you that the Metropolitan Police, as a Responsible Authority, will be objecting to this application as it is our belief that if granted the application would undermine the Licensing Objectives, being the Prevention of Crime and Disorder.

This venue is located in the Bunhill Cumulative Impact Zone, an area identified in the Islington Council Licensing Police 2013 – 2017 as one of high crime. Between 1<sup>st</sup> April 2013 and 31<sup>st</sup> March 2014 there were 2541 recorded crimes, including high levels of Assaults and AntiSocial Behaviour.

History/ Venue:

As this is a new application, in a location which was previously an unlicensed premises, there is no history for police to consider. However, the area around Old Street station suffers from a considerable amount of Anti-Social behaviour and attracts street drinkers who beg for money.

The venue is also underground and not obvious to passing emergency services. This in itself may cause issues as police will not be able to monitor the venue without actually going under the roundabout to it. Finally, in 2008 the Mayor of London banned all drinking on the Underground. The application requests an off-licence which may encourage customers to drink on the London Underground which is now a crime.

Application:

The application is quiet basic. There is little evidence of consideration of the Licensing Policy 2013 – 2017. The applicant does not offer any Conditions to promote the licensing objectives and has not provided police with a business plan of any description to allow an informed positive decision to be made.

Communication:

There has been some brief communication with the applicants agent, when more information was requested by police. Unfortunately this has not been forthcoming. Police will consider any further information if it can be supplied. This information would be in the form of a business plan/ menus/ experience of applicant/ current businesses etc.

Hours Applied for:

Although the licensable hours are within those recommended by the Licensing Police 2013 – 2017, there is not a clear business case for requesting alcohol sales at 0800 hours, especially considering the number of street drinkers in the proximity

Conditions:

The applicant has only offered two conditions around restaurant conditions. However, the application clearly states that the restaurant conditions will only apply between 0800 and 2200, but requests an alcohol licence until 2330 hours. This strongly indicates the venue will be a bar. This is not suitable in this location.

It is for the above reasons that we are objecting to the application and propose that it is refused.

Should you wish to discuss the matter further please contact me on Mobile 07799133204 or via email, [licensingpolice@islington.gov.uk](mailto:licensingpolice@islington.gov.uk)

Yours sincerely

Paul Hoppe Pc 208NI

Steven Harrington Pc 425NI  
Peter Conisbee Pc 575NI  
Islington Police Licensing Team

**Williams, John**

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**From:**  
**Sent:** 02 November 2014 12:24  
**To:** Licensing  
**Subject:** Disco Dog - Representation  
**Attachments:** RepresentationDiscoDog1.pdf; RepresentationDiscoDog2.pdf;  
RepresentationDiscoDog3.pdf

Hello,

please find attached my representation against the license to the above.

Regards,

## **Attachment to representation**

### **Public Nuisance**

The area around Old Street is famous for the high number of alcohol licensed businesses that attract a large number of young people, homeless and drug dealers with great inconvenience of residents. The tube station is already very busy and granting a license of this type will make it more difficult to access. It will also no doubt make the tube station dirtier. In consequence, the money spent on its renovation will be wasted.

### **Crime and Disorder**

Congregation in the area, especially around the tube station and the many alleys surrounding it is likely to increase the number of alcohol and drug related offences, not to mention acts of vandalism and violence.

### **Protection of Children from Harm**

Resident children and children commuting to school in the area are potentially in danger. Alcohol-selling premises in the tube station and close to the bus stops in the vicinity are likely to attract an undesirable clientele and expose youngsters to any of the offences mentioned in the other sections. This makes it harder for kids to use public transport in full safety.

### **Public Safety**

Old Street underground station has gone through a process of renovation and it appears to be safer for people to use it. The premises are now kept at a decorous level and seem to attract professionals and families. Previous problems included, amongst others, the presence of homeless, drunk people and possibly drug dealing. License of alcohol, music, and night refreshment in the tube station is likely to bring back the previous problems in the area, possibly at a higher rate. This is at the cost of safety of the public.

No matter what the steps taken by the applicant, these are problems that are beyond the control of the potential license holder as the area is already falls in the high-risk category. It is evident that granting any license in the area is inconsistent with any of the licensing objectives.

REP 4



**ISLINGTON**

**PUBLIC PROTECTION DIVISION**

Trading Standards  
222 Upper Street  
London N1 1XR

Tel: x 3874  
E-mail: doug.love@islington.gov.uk

Please reply to: Doug Love

**MEMO TO:**

**LICENSING TEAM  
222 UPPER STREET**

Our Ref:  
Your Ref:  
Date: 03/11/12

**LICENSING ACT 2003: REPRESENTATIONS BY RESPONSIBLE AUTHORITY**

**Disco Dog, Old Street Station, EC1Y 1BE**

The application for a licence for the above premises has been examined by me on behalf of the Trading Standards Section. I wish to make the following.

1. The applicant did not make contact with Trading Standards before making the application, or at any time during the process.
2. The operating schedule is inadequate for any business considering off-sales.
3. I request that the Committee does not grant a premises licence with regard to off-sales.

I believe these representations are specific and proportionate and are consistent with the Islington Council Statement of Licensing Policy.

Doug Love  
Principal Consumer Services Officer

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

1. Between the hours of 08:00 and 10:00 alcohol shall only be supplied as ancillary to a meal.
2. Alcohol supplied for consumption off of the premises shall only be sold with a meal.
3. Appropriate risk assessments shall be carried out.
4. The licensee shall adopt Challenge 25.

**Conditions proposed by the Noise Service**

5. Alcohol shall only be sold as ancillary to a table meal at all times.
6. There shall be no vertical drinking
7. Recorded music shall be restricted to ambient background levels of sound.
8. There shall be no off sales of alcohol.

**Title : Old Street  
Disused Toilets**

Islington Borough  
Boundary

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