**Licensing Act 2003 – Representation Form**

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| **Personal Details** |
| **Title: Mr** **[ ]  Mrs** **[ ]  Miss** **[ ]  Ms** **[ ]  Other** **[ ]  (please specify)**       |
| **First Name:** |       | **Surname:** |  |
| **Address:**  |       |
| **Postcode:**  |       |
| **Contact Telephone Numbers:** | **Daytime:** **Mobile:**  |            |

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| **Premises Details** *(please give as much information as possible)* |
| **Application Ref:** |       |
| **Name of Premises** |  |
| **Address of Premises:** |  |

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| **Reasons for Representation**  |
| Please provide your reasons under the relevant licensing objective below.You are not required to complete all sections. Complete only those that you consider are relevant to your representation. |
| **The Prevention of Crime and Disorder**      |
| **The Prevention of Public Nuisance**      |
| **Public Safety**      |
| **The Protection of Children from Harm** |
| In accordance with the provisions of the Licensing Act 2003, the Licensing Authority is required to include all personal details in the Committee report. Should there be exceptional circumstances, which require the protection of your identity, please explain the reasons below:      |
| **Declaration**  |
| I confirm that the information I have provided is true and correct. |
| **Signed:**       | **Dated:**       |