

# APPENDIX 2

## Tameside Metropolitan Borough Council

### Application for the review of a premises licence or club premises certificate 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 Mike Robinson, Regulatory Services Manager (Licensing), Tameside MBC

*(Insert name of applicant)*

**apply for the review of a premises licence under section 51 / apply for the review of a club premises certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below (delete as applicable)**

#### Part 1 – Premises or club premises details

<b>Postal address of premises or, if none, ordnance survey map reference or description</b> Top End Bar 132 – 134 Stamford Street Central Ashton-under-Lyne OL6 6AD	
<b>Post town</b> Ashton-under-Lyne	<b>Post code (if known)</b> OL6 6AD

<b>Name of premises licence holder or club holding club premises certificate (if known)</b> Ms Anita Mistry Jones
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<b>Number of premises licence or club premises certificate (if known)</b> PL0723
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#### Part 2 - Applicant details

I am

Please tick ✓ yes

1) an individual, body or business which is not a responsible authority (please read guidance note 1, and complete (A) or (B) below)

2) a responsible authority (please complete (C) below)

X

3) a member of the club to which this application relates  
(please complete (A) below)

**(A) DETAILS OF INDIVIDUAL APPLICANT** (fill in as applicable)

Please tick ✓ yes

Mr  Mrs  Miss  Ms  Other title  
(for example, Rev)

**Surname**

**First names**

**I am 18 years old or over**

Please tick ✓ yes

**Current postal  
address if  
different from  
premises  
address**

**Post town**

**Post Code**

**Daytime contact telephone number**

**E-mail address  
(optional)**

**(B) DETAILS OF OTHER APPLICANT**

Name and address

Telephone number (if any)

E-mail address (optional)

**(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT**

Name and address Mr M Robinson Regulatory Services Manager (Licensing) Regulatory Services Tameside Metropolitan Borough Council Tame St Depot Tame St Stalybridge SK15 1ST
Telephone number (if any) <b>0161 342 4262</b>
E-mail address (optional) mike.robinson@tameside.gov.uk

**This application to review 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 checked="" type="checkbox"/> |
| 3) the prevention of public nuisance    | <input checked="" type="checkbox"/> |
| 4) the protection of children from harm | <input type="checkbox"/>            |

**Please state the ground(s) for review** (please read guidance note 2)

On 20 March 2020, the government via a Prime Ministerial address to the nation and in response to the Coronavirus pandemic, gave a direction for all pubs, bars and restaurants to close and not to reopen until directed to do so.

The Health Protection (Coronavirus, Business Closure) (England) Regulations 2020, came into force on 21 March 2020.

These Regulations require the closure of specified businesses – including restaurants, cafes, bars and public houses - in which food and drink are sold for consumption on its premises.

On Friday, 3 April 2020 at approximately 17:15, Officers from Tameside Council Licensing Department and Greater Manchester Police visited Top End Bar, Stamford Street, Ashton. At the time of the visit, the front door of the premises was unlocked and appeared to be open for business.

Inside the premises at the time were a member of staff and two members of the public. There were pint glasses on the bar and an open bottle of cider. Following an interrogation of the CCTV system during the period of 15:54 – 17:40 (3/4/20), there is evidence to show that the premises had been open and alcohol had been consumed.

By being open, allowing persons to attend the premises and consume alcohol on the premises, this put the public at risk of contracting the virus and passing it on to others.

The DPS/PLH and management of the premises have seriously undermined the Licensing Objectives of Prevention of Crime and Disorder, Public Safety and Public Nuisance.

**Please provide as much information as possible to support the application** (please read guidance note 3)

**Please tick ✓ yes**

Have you made an application for review relating to the premises before

If yes please state the date of that application

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

**If you have made representations before relating to the premises please state what they were and when you made them**

Please tick ✓

yes

- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate **X**
- I understand that if I do not comply with the above requirements my application will be rejected **X**

**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**Part 3 – Signatures** (please read guidance note 4)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.**

Signature **M. Robinson**

.....

Date **16 June 2020**

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Capacity **Regulatory Services Manager (Licensing)**

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<b>Contact name (where not previously given) and postal address for correspondence associated with this application</b> (please read guidance note 6)	
<b>Post town</b>	<b>Post Code</b>
<b>Telephone number (if any)</b>	
<b>If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)</b>	

**Notes for Guidance**

1. A responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
2. The ground(s) for review must be based on one of the licensing objectives.
3. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
4. The application form must be signed.
5. An applicant’s agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
6. This is the address which we shall use to correspond with you about this application.

