

# Public Document Pack



## Democratic Support

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#plymlicensing

## LICENSING SUB COMMITTEE SUPPLEMENT

Tuesday 7 October 2014

10 am

Council House (Next to the Civic Centre), Plymouth

### Members:

Councillors Mrs Nicholson, Rennie and Sparling.

### Fourth Member:

Councillor Mrs Bowyer.

***Please find attached updated information in respect of appendix 4 of agenda item number 5. Please also find attached additional information for agenda item number 5 that is private and confidential.***

**Tracey Lee**

Chief Executive

## **LICENSING SUB COMMITTEE**

### **5. MY FISH BAR, 35 BRETONSIDE, PLYMOUTH**

**(Pages 1 - 8)**

The Director of Public Health will submit a report regarding an application to grant a premises licence for My Fish Bar, 35 Bretonside, Plymouth.

# LICENSING REPRESENTATION FORM



If you wish to make a representation against or in support of any licensing application, please read the guidance note '[How to make a licensing representation](#)' prior to completing this form.

Please note that a full copy of your representation will be sent to the applicant at any hearing of this matter.

### Section 1: Licence application details

I wish to object to the following application     I wish to support the following application

Name of applicant (if known) METIN YOBAS  
Premises name and address 35 BRETONSIDE PLYMOUTH  
Postcode \_\_\_\_\_

Which type of application you wish to make your representation about?

- Application for a new premises licence
- Application to vary a premise licence
- Application for a review of a premises licence



### Section 2: Your personal details

If you are acting as a representative, please go to Section 3

Title  Mr  Mrs  Miss  Ms  Other (please state)

Surname \_\_\_\_\_ Forenames \_\_\_\_\_  
Address DISCOVERY WHARF SUTTON HARBOUR  
PLYMOUTH Postcode PL4 0RS  
Email \_\_\_\_\_ Telephone \_\_\_\_\_

You must provide your full residential address (or business address if you are objecting from a business)

### Section 3: Representative details

If you represent residents or businesses please complete the details below

Name of representative/organisation \_\_\_\_\_  
Address \_\_\_\_\_  
Postcode \_\_\_\_\_

I am

Representative of residents association

Representative of trade/business association

Ward Councillor

Other (please specify) \_\_\_\_\_

MP \_\_\_\_\_

**Section 4: Reason(s) for representation**

Under the Licensing Act 2003, for a representation to be relevant it must set out the **likely effect** of granting the application on the promotion of the four licensing objectives. Any representations that are considered to be frivolous or vexatious will not be accepted.

It is important that you set out any personal experiences as these will be considered as relevant.

Please fill in the reason(s) for your representation in the space provided under each Licensing Objective it relates to. You need to give as much detail as possible so that the Licensing Authority can assess the relevance of your representation. Please attach any supporting documents/further pages as necessary, numbering all additional pages. Try to be as specific as possible and give examples such as "1 February, I could hear loud music from the premises between 10pm and 1am. I am concerned that if the premises opens until 2am that this will cause a nuisance to me and other residents in the street and will affect my sleep."

**The prevention of crime and disorder**

For example evidence of anti-social behaviour, police incidents

In my opinion to permit ALL NIGHT trading in a largely residential area will create a nuisance disturbance and potential anti-social behavior which will cause a nuisance to me and other residents in the area and will affect our sleep.

**Public safety**

For example alterations to the premises, capacity limits

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**The prevention of public nuisance**

For example noise disturbance, littering

In my opinion to permit ALL NIGHT Trading will create  
noise disturbance and litter in the streets in this  
largely residential area.

**The protection of children from harm**

For example underage sales, exposure to certain performances

I \_\_\_\_\_ hereby declare that all information I have submitted is true  
and correct.

Signed \_\_\_\_\_

Date

03/09/2014

Please send the completed form to

Licensing Department  
Plymouth City Council  
Civic Centre  
Plymouth PL1 2AA  
T: 01752 305465  
E: [licensing@plymouth.gov.uk](mailto:licensing@plymouth.gov.uk)

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By virtue of paragraph(s) 1, 2 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

Document is Restricted

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