

REPORT OF THE DEPUTY CHIEF EXECUTIVE

LICENSING SUB-COMMITTEE – 28 OCTOBER 2014

LICENSING ACT 2003 – CONSIDERATION OF THE GRANT OF A PREMISES LICENCE

A1 CONVENIENCE STORE, 50 HIGH STREET EAST, SUNDERLAND

ZAHIR KHAN

1.0 PURPOSE OF REPORT

- 1.1 To consider an application for the grant of a premises licence for the above-mentioned premises.

2.0 DESCRIPTION OF DECISION

- 2.1 When determining the application the Sub-Committee is requested to have regard to the representations referred to in paragraph 4.0 below and to take such steps as they consider appropriate for the promotion of the licensing objectives. The steps may be: -

- a) to grant the application,
- b) to modify the conditions of the licence, or
- c) to reject the whole or part of the application.

3.0 INTRODUCTION/BACKGROUND

- 3.1 Relevant representations have been received in relation to the application and these are detailed at section 4.0.
- 3.2 A copy of the application form is attached as Appendix 1. The licensable activity requested is the sale by retail of alcohol for consumption off the premises, Monday to Saturday 06:00 a.m. to 10:00 p.m. and 06:00 a.m. to 09:00 p.m. on a Sunday.

4.0 CURRENT POSITION

- 4.1 Eight written representations have been received from interested parties. Included in these representations are one individual letter signed by two persons and six copies of the same letter, only one copy of the repeated letter is attached. Representations have also been received from Northumbria Police and Councillor Barbara McClennan. Copies of the representations are attached as Appendix 2.

5.0 REASONS FOR THE DECISION

- 5.1 To determine the application as requested by section 18(3) of the Licensing Act 2003.

6.0 ALTERNATIVE OPTIONS

- 6.1 None submitted.

7.0 RELEVANT CONSIDERATIONS/CONSULTATIONS

- 7.1 There are no other considerations that require the attention of the Sub-Committee.

8.0 GLOSSARY

- 8.1 No acronyms or abbreviations have been used in this report.

9.0 LIST OF APPENDICES

Appendix 1 – Application form.
Appendix 2 – Written representations.

10.0 BACKGROUND PAPERS

- 10.1 None.

Appendix 1

POSTAL ORDER £100 11/9/14

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.

NAME ZAHIR KHAN
(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 <u>AI CONVENIENCE STORE.</u> <u>50 HIGH ST EAST.</u> <u>SUNDERLAND.</u> <u>SR1 2JU</u>			
Post town	<u>SUNDERLAND</u>	Postcode	<u>SR1 2JU</u>
Telephone number at premises (if any)		<u>0191 510 3508</u>	
Non-domestic rateable value of premises		<u>£ 1,075</u>	

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | |
|---|---|
| a) an individual or individuals * | <input checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual * | |
| i. as a limited company | <input type="checkbox"/> please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> please complete section (B) |
| c) a recognised club | <input type="checkbox"/> please complete section (B) |
| d) a charity | <input type="checkbox"/> 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)	
Surname KHAN			First names ZAHIR		
I am 18 years old or over				<input checked="" type="checkbox"/> Please tick yes	
Current postal address if different from premises address		50 HIGH ST EAST SUNDERLAND.			
Post town SUNDERLAND		Postcode SRI 2JU			
Daytime contact telephone number		07454 394 095.			
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
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(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
17 09 14

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)

RETAIL STORE / GENERAL DEALER.
ITS THE ^{ONLY} SHOP ON THIS STREET.
MEDIUM SIZE THAT SUPPLIES ALL
BASIC NECESSITIES. ITS A NEW
BUSINESS THAT WILL INCLUDE ALCOHOL
TO ITS EXISTING BUSINESS.

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? SALE OF ALCOHOL

(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"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish		
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for performing plays (please read guidance note 4)	
Thur				
Fri			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 (please read guidance note 5)	
Sat				
Sun				

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)			
Mon						
Tue						
Wed						
Thur			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)			
Fri						
Sat						
Sun						
			<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> (please read guidance note 5)			

C

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

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<u>Please give further details here</u> (please read guidance note 3)			
Tue						
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)			
Thur						
Fri			<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> (please read guidance note 5)			
Sat						
Sun						

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)			
Mon						
Tue						
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)			
Thur						
Fri						
Sat			<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> (please read guidance note 5)			
Sun						

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					
Fri			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					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both <input type="checkbox"/>			
Mon			<u>Please give further details here</u> (please read guidance note 3)			
Tue						
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)			
Thur						
Fri			<u>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</u> (please read guidance note 5)			
Sat						
Sun						

H

Anything of a similar description to that falling within (e), (f) or (g) 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	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors <input type="checkbox"/>
Mon				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)	
Wed				
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)	
Fri				
Sat			<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> (please read guidance note 5)	
Sun				

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish		
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)	
Thur				
Fri			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 (please read guidance note 5)	
Sat				
Sun				

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption - please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
Day	Start	Finish	Both <input type="checkbox"/>		
Mon	0600 05	2200	State any seasonal variations for the supply of alcohol (please read guidance note 4) NONE		
Tue	0600	2200			
Wed	0600	2200			
Thur	0600	2200	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 (please read guidance note 5) NONE.		
Fri	0600	2200			
Sat	0600	2200			
Sun	0600	2100			

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

Name	ZAHIR KHAN.
Address	AI CONVENIENCE STORE 50 HIGH ST EAST. SUNDERLAND.
Postcode	SR1 2JU
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

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	0600	2200	<u>NONE</u>
Tue	0600	2200	
Wed	0600	2200	
Thur	0600	2200	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 (please read guidance note 5)
Fri	0600	2200	
Sat	0600	2200	
Sun	0600	2100	

NONE.

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)

KEEP ALL C.C.T.V UPDATE AND LOGGED.
WORK CLOSELY WITH POLICE.
BE VIGILANT, ALERT.
CHECK SUSPECTED UNDER AGE DRINKERS.
NO ALCOHOL TO BE CONSUMED ON PREMISES.

b) The prevention of crime and disorder

COMBINATION OF FACTORS FROM BEING
ALERT, MONITORING, KEEPING LOGS.
C.C.T.V AND WORK IN PARTNERSHIP
WITH POLICE.

c) Public safety

THE PREMISES WILL ENSURE NO
UNDERAGE IS SERVED, WILL CHECK
I.D IF NECESSARY. WILL CARRY OUT
ANY ASSESSMENTS REQUIRED, FOR
SAFETY.

d) The prevention of public nuisance

THE PROPOSED LICENCE IS ONLY FOR OFF
THE PREMISE CONSUMPTION. WE WILL
ADHERE STRICTLY TO ALL REQUIREMENTS
AND KEEP REFUSAL LOGS. STAFF WILL BE
FULLY TRAINED.

e) The protection of children from harm

CHALLENGE 21 POLICY WILL BE ADHERED TO STRICTLY. WE WILL ENSURE EACH SALE IS MADE VIA VALID PHOTO I.D. PROMINENT POSTERS WITH LEGAL AGE LIMIT AND A REFUSAL LOG WILL BE KEPT.

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	<i>Z. Khan</i>
Date	<i>8.09.2014.</i>
Capacity	<i>MANAGER.</i>

For joint applications, signature of 2nd applicant or 2nd 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	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)			
ZAHIR KHAN. AL CONVENIENCE STORE. 50 HIGH ST			
Post town	SUNDERLAND	Postcode	SR1 2JU
Telephone number (if any)	07454 394 095.		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

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.

Consent of individual to being specified as premises supervisor

I ZAHIR KHAN.
[full name of prospective premises supervisor]

of AI CONVENIENCE ST
50 HIGH ST EAST
SUNDERLAND
SR1 2JU

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

LIQUOR LICENSE.
[type of application]

by

ZAHIR KHAN.
[name of applicant]

relating to a premises licence
[number of existing licence, if any]

for AI CONVENIENCE ST
50 HIGH ST EAST
SUNDERLAND.
SR1 2JU.

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

MR ZAHIR KHAN.
[name of applicant]

concerning the supply of alcohol at

A1 CONVENIENCE STORE
50 HIGH ST EAST
SUNDERLAND.
SR1 2JU

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

[insert personal licence number, if any]

Personal licence issuing authority

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed

Z. Khan

Name (please print)

ZAHIR KHAN.

Date

8-09-2014.

The image displays three architectural floor plans of a building, oriented vertically. At the top left, the text "Sun Deck" is written vertically, with an arrow pointing towards the plans. The plans are labeled with room names: "Kitchen", "Bedroom", "Bathroom", "Living", and "Sleep". A dimension line on the right side of the plans indicates a width of 7890. The plans show various rooms and a central staircase area. The top plan includes a "Sleep" room and a "Bathroom". The middle plan includes a "Kitchen", "Bedroom", "Bathroom", and "Living" room. The bottom plan includes a "Kitchen", "Bedroom", "Bathroom", and "Living" room. The plans are oriented vertically on the page.

2ND FLOOR

50
CONVENIENCE
STORE.

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other ☐ _____

☐ Day ☐ Night ☐ Other ☐ _____

Circle number next to name



Malik Enterprises

Architectural Service

10000 10th Avenue, Suite 100
 San Diego, CA 92121
 Tel: 619-591-1000
 Fax: 619-591-1001

Circle number next to name

Appendix 2



To: Mr Ernie Humphrey.
Senior Licencing Officer.
Office of Chief Executive.
Street Scene
Public Protection & Public Regulatory Services.
Sunderland City Council.
Civic Center. Burdon Rd.Sunderland.

Thursday 2nd October
2014.

Dear Sir,

We are writing to object to application for Alcahol Sale Licence made by Al Convenience Store,High St East,East End,Sunderland.

We object because in the East End we have sufficient businesses/Pubs selling alcahol, in a very small vulnerable area.

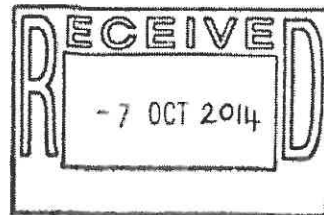


We are also concerned as we have The Salvation Army, Swan House, Accomodation is close to this Store. We are concerned for the Residents living in this accomodation who suffer Social/Personal and Alcahol Problems, who could purchase alcahol from early hours of the morning to evening availability.

This Al Convenient Store has sold alcahol elegally in the past, without the necessary licence.

They have sold alcahol elegally to under - age children, who's parents raised their concerns with the local Police Team.

Al Managers/Owners have shown they would not be reponsible managers/sellers of alcahol as they have shown by their mis - management in the past. They cannot be trusted with such a responsible licence.

Yours Faithfully.



X 6

East End Residents Association

Ernie Humphrey
Senior Licensing Officer
Office of Chief Executive
Street Scene Public Protection & Regulatory Services
Sunderland City Council
Civic Centre
Burdon Road
Sunderland
SR2 7DN

Friday 3rd October 2014

Dear Mr Humphrey,

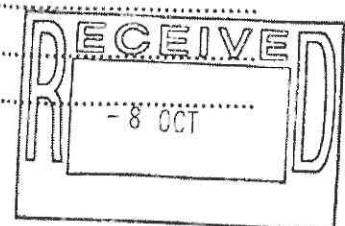
Re: Objection to application for alcohol sale license A1. Convenience Store, High Street East, Sunderland.

With reference to the above application, I strongly object for the following reasons:

1. A1 Convenience Store, when first opened was selling alcohol to under age children in the East End area.
2. A1 Convenience Store, when first opened was selling alcohol without having the relevant/appropriate licence, we believe the police were involved/informed.
3. A1 Convenience Store was encouraging young people into the store and congregating outside the store in groups which parents complained about, and were very concerned.
4. We do not believe A1 Convenience Store has shown they are a responsible business and would not manage alcohol safeguards appropriately.

Yours Sincerely

Address:





**NORTHUMBRIA
POLICE**

8 October 2014

Mr Zahir Khan
50 High Street East
Sunderland
SR1 2JU

Sunderland Area Command
Gillbridge Avenue Police Station
Gillbridge Avenue
Sunderland
SR1 3AW

Cc: Sunderland Council

Tel: 101
Fax: 0191 563 6198

RE: Application for a new premises licence, A1 Convenience Store,
Sunderland

Northumbria Police are in receipt of the above application and wish to object on the grounds of crime and disorder. The premise is situated in Sunderland City Centre Policing Area. Reported crime between March 2014 and August 2014 within the close proximity of the premises is shown in the table below:

Anti-Social Behaviour	Criminal Damage and Arson	Drugs	Shoplifting	Violent Crime and Sexual Offences
434	42	53	60	54

The Police have recently been dealing with issues at the premises and persons working at the premises and believe that it contributes to the high levels of anti-social behaviour in the area.

Information passed to Police suggests that the staff have been selling cigarettes and alcohol to persons under the age of 18 years. When Police Officers have attended the premises alcohol was found hidden beneath the counter (statements to follow).

I submit this report for your consideration.

Sean McKenna
Chief Inspector
Sunderland Area Command
Northumbria Police

Subject:

FW: New Premise Licence Application

From: Cllr Barbara McClennan
Sent: 03 October 2014 09:28
To: Ernie Humphrey
Subject: Re: New Premise Licence Application

Hello Ernie

I wish to object to the application by A1 stores of High St East on the following grounds:

- 1) I feel there is sufficient supply of premises in the area already through a mix of retail outlets, pubs and restaurants etc.
- 2) This premises is situated in close proximity to a number of hostels and HMOs catering for residents who have complex problems including alcohol dependence and misuse. They are receiving support during rehabilitation from a number of agencies and the opening of another liquor store risks negating the impact of that support.
- 3) There will be a real risk of increased public disorder in the area given the likely nature of the customer base attracted to purchase alcohol ie hostel residents and non-residents from outside the city who already frequent the area to access other services including methadone clinic, NERAF, MIND etc. Several hostel operators have sensibly adopted no-alcohol policies with breaches leading to eviction. There is a clear risk of increase the city's homeless figures if we put additional temptation so close to those struggling with alcohol-related issues.
- 4) This is effectively a retrospective application after I and residents alerted authorities of concerns over the illegal selling of alcohol to school children. As such, I do not believe the applicant has demonstrated they are fit and proper people to hold a licence or that they will observe the law. There is a real risk to public order if any such breaches occur (Parents were extremely concerned with the alleged under age alcohol selling and were prepared to take direct action).
- 5) The property now has a reputation among young people for 'selling booze' to them; is on a main route into the city for young people and risks becoming a magnet for those wishing to buy alcohol either themselves or through third parties.
- 6) Police resources are already stretched in this area and an additional outlet for the sale of alcohol would strain those resources even more.
- 7) It is totally unacceptable to be expected to support the sale of drink from 6am in the morning.

Can you advise me what else I can do to put forward my concerns ie make representation to the licensing committee?



Cllr McClennan
Hendon ward

From: Ernie Humphrey
Sent: Thursday, October 02, 2014 10:21 AM
To: Cllr Barbara McClennan
Subject: New Premise Licence Application

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