



WARWICK DISTRICT COUNCIL
Licensing Act 2003

REPRESENTATION FORM FROM RESPONSIBLE
AUTHORITIES

Responsible Authority (please delete as applicable):
Environmental Protection

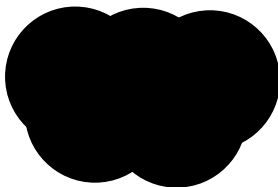
Your Name	Peter Lawson
Job Title	Senior Environmental Health Officer
Postal and email address	Warwick District Council Riverside House, Milverton Hill, Leamington Spa CV325 HZ
Contact telephone number	01926 456715

Name of the premises you are making a representation about	Golden Wines & Spirits - Extn of hours
Address of the premises you are making a representation about	, 109 Warwick Street, Leamington Spa, Warwickshire, CV32 4QZ

Which of the four licensing Objectives does your representation relate to?	Yes Or No	Please detail the evidence supporting your representation. Or the reason for your representation. Please use separate sheets if necessary
To prevent public nuisance	yes	Proposed extension of closing time from midnight to 4am is likely to give rise to noise nuisance to town centre residents from customers going to and from the shop and hanging around drinking on the street in the silent hours.

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.	Retain premises opening hours as per the existing licence.
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Signed:



Date:

30./3/21

Please return this form along with any additional sheets to Licensing, Health and community Protection, Riverside House, Milverton Hill, Royal Leamington Spa. CV32 5HZ.
This form must be returned within the Statutory Period.