Notice of Meeting

Licensing Sub-Committee

Tuesday 20th November 2012 at 11.30 am

in the Council Chamber, Council Offices, Market Street, Newbury RG14 5LD

Members Interests

Note: If you consider you may have an interest in any Application included on this agenda then please seek early advice from the appropriate officers.

Date of despatch of Agenda: Friday, 9 November 2012

FURTHER INFORMATION FOR MEMBERS OF THE PUBLIC

If you require further information about this Agenda, or to inspect any background documents mentioned in the reports, please contact Denise Anns - Tel: (01635) 519486 - Email: danns@westberks.gov.uk.

Further information and Minutes are also available on the Council's website at www.westberks.gov.uk

Raffaele Viglotti



Agenda - Licensing Sub-Committee to be held on Tuesday, 20 November 2012 (continued)

To: Councillors Jeff Beck (Chairman), Billy Drummond and Geoff Mayes

Substitute: Councillor Andrew Rowles

Agenda

Part I Page No.

1 Declarations of Interest

To receive any declarations of interest from Members.

- 2 Schedule of Licensing Applications
- (1) Application No. 12/01615/LIA Application for a Personal Licence

Proposal: Personal Licence Application

Applicant: Raffaele Vigliotti

- (2) Application Document 1 4
- 3 Representation from Thames Valley Police 5 6

Andy Day Head of Strategic Support

West Berkshire Council is committed to equality of opportunity. We will treat everyone with respect, regardless of race, disability, gender, age, religion or sexual orientation.

If you require this information in a different format or translation, please contact Moira Fraser on telephone (01635) 519045.



#37-Agenda Item 2(2)

Application for a personal licence

- 8 OCT 2012

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 or typed in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

1. Your persona			16
TITLE Please	e tick		
Mr Mrs Mi	iss Ms Other (please state)		
Surname	DEDONALDO VIGUOTTI		
Forenames	AFFAELE		
PREVIOUS NAM	IES (if relevant) please enter details of any previo	us name	s or
TITLE Please	Please continue on a separate sheet if necessary tick	•	
Mr 🗌 Mrs 🗌 Mi	ss Ms Other (please state)		
Surname			
Forenames			
I am 18 years ol	d or over. Please tick	Yes	No
ADDRESS WHE	RE ORDINARILY RESIDENT (We will use this add	ress to	
correspond with below).	n you unless you complete the separate correspon	ndence b	XOX
TATE	HEDGES.		
Da	-1		
SA	7 H ROAU		
PA	HAWORTH EAGING		
6	7 -1 1 1		
K	EAGING		
Post town	Post code 7	7	
	KG / JQ >)	
TELEPHONE NU	MBERS		
Daytime			
Evening	77010		
Mobile	0/196905341		
FAX NUMBER			
E-MAIL ADDRES	S (if you would prefer us to correspond with you	by e-mai	il)

Addi				
	respondence associated wit	n this application (if e	different t	0
the address abo	ve)			
1				
D				
Post town		Post code		
TELEPHONE NU	MRERS	/		
Daytime	INDER()			
Evening				
Mobile				
E-MAIL ADDRES	S (if you would prefer us to	correspond with you	h) a mai	11
L-MAIL ADDICES	os (ii you would preier us to	correspond with you	by e-mai	1)
Market Ma				
2. Your licensing	gualifications			
Read Note 1	, 4	P	lease tick	Ves
Please indicate be	elow which one of these staten		10000 (101	,,,,
	dited licensing qualification	terite applies to yea.	T	N
2. I hold a certified				Ħ
3. I hold an equiva				Ħ
	f prescribed description			Ī
If you have ticked	either of statements 1, 2 or 3	olease provide details	of your	
qualification in the	box below (name of qualificat	ion, date of issue, issu	ing body)	and
	ur qualification with your applic			
If you have ticked	statement 4, please provide ev	vidence that you are a	person of	
prescribed descrip	otion.			
		0		
	tstanding applications for a			
Note: You may onl	y hold one personal licence at	a time.	Please t	ick
Do you currently he	old a personal licence?	71 71 Section Revenue and Rose as assessed	Yes	No,
				V
Do you currently ha	ave any outstanding applicatio	ns for a personal		No/
licence, with this or	any other licensing authority?			V

Has any personal lice years?	nce held by you been	n forfeited in	n the last 5	Yes	No
Licensing Authority					(E)
Licence number			<u> </u>		
Date of issue					
Date of expiry					
Any further details			-1		
4. CHECKLIST:					
I have				Please tick	
likeness of me community or	photographs of myse by a solicitor or nota any individual with a	ry, a persoi professiona	n of standing in Il qualification	n the	
prescribed des	•				
or the results of	ninal conviction certi f a subject access se l Identification Servic	earch of the			
form (Schedule	•			declaration	
made or enclos	sed payment of the fe	ee for the ap	oplication		
5. Declaration					
The information contand belief. t is an offence knowin with an application for	gly or recklessly to m	iake a false	statement in	or in connec	tion
reated as making a fa makes use of a docum prosecution and a fine	lse statement if he preent that contains a fa	oduces, fur alse l statem	nishes, signs ent). To do so	or otherwise)
BIGNATURE	A LI LIVE TO THE PARTY OF THE P		DATE 26	19/15	ζ,
OTES				,	

Information on the Licensing Act 2003 is available on the website of the Department for Culture, Media and Sport

http://www.culture.gov.uk/alcohol and entertainment/default.htm or from your local licensing authority.

1. Licensing qualifications

Licensing qualifications are dealt with in section 120(8) and (9) of the Licensing Act 2003.

Disclosure of convictions and declaration

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 or typed in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

A REPORT OF THE PROPERTY OF TH	ails	
TITLE Please tic	k	
	Ms Other (please state)	
Surname VI6L	10TT1	
Forenames RAF	IOTTI FAELE	
PREVIOUS NAMES (if relevant) please enter details of any previous names o	r
maiden names. Pleas	se continue on a separate sheet if necessary.	
7 10200 410	•	
	Ms Other (please state)	
Surname		
Forenames		
	E .	
	sonal licence in the last 5 years	L
	question if you are applying under regulation 8 of t	he
Licensing Act (Perso	nal licences) Regulations 2005 Please ti	ick
Has any personal licer		No.
If yes, please provide		
Name of court		
Name of court Address of court		
Address of court		<u> </u>
Address of court		
Address of court Date of forfeiture		
Address of court Date of forfeiture Offence which resulted		
Address of court Date of forfeiture Offence which resulted in the forfeiture		
Address of court Date of forfeiture Offence which resulted in the forfeiture		
Address of court Date of forfeiture Offence which resulted in the forfeiture		

Agenda Item 3

From: King Mike [mailto:Mike.King@thamesvalley.pnn.police.uk]

Sent: Fri 19/10/2012 1:05 PM

To: Licensing **Cc:** Licensing

Subject: Personal Licence Application

Hi All

Personal Licence Application

Raffaele Viglotti

With regard to the application made by the above a PNC check has revealed that he was convicted of Assault

Occasioning Actual Bodily Harm and was given a Conditional Discharge covering two years.

However, he was ordered to pay £500 compensation and awarded £250 costs.

The Rehabilitation of Offenders Act 1974 advises that a person aged eighteen years or over and

has been ordered to pay compensation the rehabilitation period is five years.

The compensation order was given on 25th August 2010 and therefore that means that the rehabilitation period will not be achieved until 25th August 2015 when a fresh application may be made..

Thames Valley Police **OBJECT** to the application.

Regards,

Mike

Mike King I Licensing Officer I Thames Valley Police I Reading & West Berkshire Police Area I

Telephone 101 | Internal 7516353 | Fax 01189 536353 | Reading Police Station, Castle Street, Reading, RG12 7TH

