

Notice of Meeting

Licensing Sub-Committee

Monday 25th March 2013 at 2.00 pm

in 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, 15 March 2013

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

Mr James R Kimber, The Brambles 53 Victoria Road, Mortimer, Reading RG7 3SL



To: Councillors Jeff Beck, Paul Bryant (Chairman) and Adrian Edwards
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. 13/00350/LIA - Mr James R Kimber, The Brambles, 53 Victoria Road, Mortimer, RG7 3SL** 1 - 8
Proposal: Application for a Personal Licence
Applicant: Mr James R Kimber, The Brambles, 53 Victoria Road, Mortimer RG7 3SL
- 3 **Representations** 9 - 10

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.

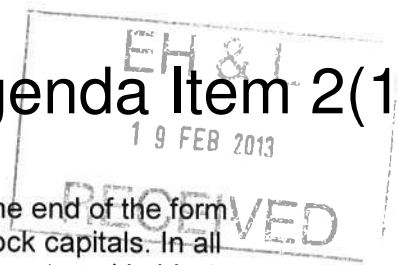
If you require this information in a different format or translation, please contact Moira Fraser on telephone (01635) 519045.



13/00350/KIA

Agenda Item 2(1)

Application for a personal licence



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 personal details					
TITLE Please tick Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)					
Surname	KIMBER				
Forenames	JAMES ROBERT				
PREVIOUS NAMES (if relevant) please enter details of any previous names or maiden names. Please continue on a separate sheet if necessary.					
TITLE Please tick Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)					
Surname					
Forenames					
I am 18 years old or over. Please tick <table border="1" style="float: right;"> <tr> <td>Yes</td> <td>No</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Yes	No	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No				
<input checked="" type="checkbox"/>	<input type="checkbox"/>				
ADDRESS WHERE ORDINARILY RESIDENT (We will use this address to correspond with you unless you complete the separate correspondence box below).					
THE BRANGLES 53 VICTORIA ROAD NORTHMEN READING BERKS RG7 3SL					
Post town READING READING	Post code RG7 3SL				
TELEPHONE NUMBERS					
Daytime	01189 531767				
Evening	—				
Mobile	0777 5563201				
FAX NUMBER	—				
E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail) james_kimber@hotmail.co.uk					


Address for correspondence associated with this application (if different to the address above)	
TRAINING INFORMATION CENTRE LISCARD BUSINESS CENTRE 188 LISCARD ROAD WALLASEY	
Post town	Post code
	CH44 5TN
TELEPHONE NUMBERS	
Daytime	0151 691 4929
Evening	
Mobile	
E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail)	
EMMA@TRAININGINFORMATIONCENTRE.CO.UK	

2. Your licensing qualifications	
Read Note 1	Please tick yes
Please indicate below which one of these statements applies to you:	
1. I hold an accredited licensing qualification	<input checked="" type="checkbox"/>
2. I hold a certified qualification	<input type="checkbox"/>
3. I hold an equivalent qualification	<input type="checkbox"/>
4. I am a person of prescribed description	<input type="checkbox"/>
If you have ticked either of statements 1, 2 or 3 please provide details of your qualification in the box below (name of qualification, date of issue, issuing body) and please enclose your qualification with your application. If you have ticked statement 4, please provide evidence that you are a person of prescribed description.	
EDI level 2 Award for Personal Licence Holders, ISSUED: <div style="margin-left: 40px;">25/07/2012</div>	

3. Previous or outstanding applications for a personal licence		
Note: You may only hold one personal licence at a time.	Please tick	
Do you currently hold a personal licence?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Do you currently have any outstanding applications for a personal licence, with this or any other licensing authority?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Has any personal licence held by you been forfeited in the last 5 years?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Licensing Authority			
Licence number			
Date of issue			
Date of expiry			
Any further details			

4. CHECKLIST:		
I have		Please tick yes
<ul style="list-style-type: none"> enclosed two photographs of myself, one of which is endorsed as a true likeness of me by a solicitor or notary, a person of standing in the community or any individual with a professional qualification 		<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> enclosed any licensing qualification I hold or proof that I am a person of prescribed description 		<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> enclosed a criminal conviction certificate or a criminal record certificate or the results of a subject access search of the police national computer by the National Identification Service 		<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> enclosed a completed disclosure of criminal convictions and declaration form (Schedule 3) 		<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> made or enclosed payment of the fee for the application 		<input checked="" type="checkbox"/>

5. Declaration	
<p>The information contained in this form is correct to the best of my knowledge and belief.</p> <p>It is an offence knowingly or recklessly to make a false statement in or in connection with an application for the grant or renewal of a personal licence. (A person is to be treated as making a false statement if he produces, furnishes, signs or otherwise makes use of a document that contains a false statement). To do so could result in prosecution and a fine not exceeding level 5 on the standard scale.</p>	
SIGNATURE 	DATE 23rd AUGUST 2012

NOTES

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.

1. Your personal details	
TITLE Please tick Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	KIMBER
Forenames	JAMES ROBERT
PREVIOUS NAMES (if relevant) please enter details of any previous names or maiden names. Please continue on a separate sheet if necessary.	
TITLE Please tick Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	
Forenames	

2. Forfeiture of a personal licence in the last 5 years		
Do not answer this question if you are applying under regulation 8 of the Licensing Act (Personal licences) Regulations 2005		
		Please tick
Has any personal licence held by you been forfeited in the last 5 years? If yes, please provide details below:		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Name of court		
Address of court		
Date of forfeiture		
Offence which resulted in the forfeiture		
Any additional details		

3. Relevant or foreign offences		
Read Note 1		Please tick
Have you been convicted of any relevant offence or foreign offence?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If you have been convicted of any relevant offences you must provide details for each conviction of the date of conviction, the name and location of the convicting court, offence of which you were convicted and the sentence imposed:		
<p>DR 10 - Drink Drive 55mg in breath (35 being limit) Sentence Passed 13 November 2009 COURT - READING - 1076 CASE NUMBER: 430900734318 £100 FINE 12 MONTH DAN - DRINK DRIVER EDUCATION so 9 MONTHS</p>		
If you have been convicted of any foreign offences you must provide details for each conviction of the date of conviction, the name and location of the convicting court, offence of which you were convicted and the sentence imposed:		

4. Declaration			
I declare that I have not been convicted of any relevant offence or any foreign offence			
SIGNATURE 		DATE	23 rd AUGUST 2012

5. Declaration			
The information contained in this form is correct to the best of my knowledge and belief.			
It is an offence knowingly or recklessly to make a false statement in or in connection with an application for the grant or renewal of a personal licence. (A person is to be treated as making a false statement if he produces, furnishes, signs or otherwise makes use of a document that contains a false statement). To do so could result in prosecution and a fine not exceeding level 5 on the standard scale.			
SIGNATURE 		DATE	23 rd AUGUST 2012

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Certificate

This is to certify that

JAMES KIMBER

has been awarded the

EDI Level 2 Award for Personal Licence Holders

(Accreditation No. 500/9146/3)

having satisfied the requirements of EDI



Rod Bristow
Chief Executive

EDI

Supporting learning
and performance

HWRL17A71/11819283

Issued Date 25 Jul 2012

Serial No. 20813188



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Welsh Government

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Agenda Item 3 Licence Application Notification

Licensing Officer **Mike King**

Application Type **New Personal Licence**

Date Received **19th February 2013** Date Due **5th March 2013**

Name **Mr James Robert Kimber**
Address **The Brambles, 53 Victoria Road,
Mortimer, Reading**

Content of Application:
The applicant advises that he holds an EDI Level 2 Award for Personal Licence Holder.

Licensing Officer's Comments:
The applicant declares that he has an unspent conviction for a relevant offence in that he was convicted for driving with excess alcohol contrary to S(4)(5) of the Road Traffic Act 1988.

Outcome:
Thames Valley Police therefore, OBJECT to the granting of the licence. However, the applicant may apply again when the conviction has become spent.

Signature:.....

Date **20 02 2013**

*No signature is required if responding by email, as there will be an electronic trail

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