EH & L 2 5 JUL 2014 RECEIVED

## **LICENSING ACT 2003**

## Representations form

Details of the representee:			
Name Amanda Cooper Address 13 Coombl Court Thatcham			
Address 13 Coombe Court			
Thatcham			
Postcode RG19 47R			
Telephone Number 01635 820 744			
Telephone Number 01635 820 744  Email address ananday cooper a htmlamet com			
Please note the Council is required under the Licensing Act 2003 (Hearings) Regulations 2005 to provide the applicant with copies of the relevant representations made.			
Details of the application to make representation(s) on:			
Application Reference Number EMF/ 26508/1792/RPB  Name of Premises Saurab www.			
t v			

Premises Address (oombe Square) Thatcham
Postcode RG19 45F
Under the Licensing Act 2003, for a representation to be relevant it must be one that is about the likely effect of the application on the promotion of the four licensing objectives.
Please give details of your representation(s) and include information as to why the application would be unlikely to promote any of the following objective(s):
The Prevention of Crime and Disorder:
The shop will be open late and with an alcohol wence will encourage people to congregate in the congregate in and supplementary areas
Public Safety:
Increased risk to public due to intermedation behaviour. Possible murging and anti-social behaviour you and affected built up area. Lute right opening oneans people will congregate with The Prevention of Public Nulsance:
Openana preans people will congregate with The Prevention of Public Nulsance:  The Broadway Dispersal Order & Wont indude Soundburys as Coombe Square and Coombe Coult Sit Just automatistic the dispersal Zone Despersal Tone
The Protection of Children from Harm:
Parents will be agraced to let their children play in sciordens due to
We already have 5 Public houses (Pubs) in The area of the Broadway Thatcham. We do not wish to encourage further drunking and hehalis

Representation Form-2	wing alcoholicon 22/07
Also older people be teenagers, who are Vi	inherable to the greats
of alcahol.	00
Signed: 1.00.pu	***************************************
Date: 23/7/14	***************************************

Please send completed form to the Senior Licensing Officer at:

West Berkshire Council, Culture and Environmental Protection, Environmental Health & Licensing, Council Offices, Market Street, Newbury, Berkshire RG14 5LD