

Leicester
City Council

Application for the review of a premises licence or club premises certificate 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.

I Noise and Pollution Control Team, Leicester City Council

Apply for a review of a premises licence under section 51 of the Licensing Act 2003 for the premises described in Part 1 below

Part 1 – Premises or club premises details

Postal Address of premises or, if none, ordnance survey map reference or description Abu Daniel 161 Belgrave Gate	
Post Town: Leicester	Post Code (if known): LE1 3HS

Name of premises licence holder or club holding club premises certificate (if known) Mr Mohammad Attuf
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Number of premises licence of club premises certificate (if known) LEIPRM1772

Part 2 - Applicant details

I am

Please Tick Yes

- 1) An interested party (please complete (A) or (B) below)
 - a) A person living in the vicinity of the premises
 - b) A body representing persons living in the vicinity of the premises

- c) A person involved in business in the vicinity of the premises
- d) A body representing persons involved in business in the vicinity of the premises

2) A responsible authority (please complete C below) **YES**

3) A member of a club to which this application relates (please complete (A) below)

(A) DETAILS OF INDIVIDUAL APPLICANT (fill in as applicable)

Please tick

Mr Mrs Miss Ms Other title
(for example, Rev)

Surname

First names

I am 18 years old or over

Please tick yes

Current postal address if different from premises address

Post town

Post Code

Daytime contact telephone number

E-mail address (optional)

(B) DETAILS OF OTHER APPLICANT

Name and Address

Telephone Number

Email Address (optional)

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and Address Chris White Leicester City Council Noise and Pollution Control Team York House 91 Granby Street Leicester LE1 6FB
Telephone number (if any) 0116 454 3059
E mail address (optional) chris.white@leicester.gov.uk

This application to review relates to the following licensing objective(s)

Please tick one or more boxes

- | | |
|---|-------------------------------------|
| 1) the prevention of crime and disorder | <input type="checkbox"/> |
| 2) public safety | <input type="checkbox"/> |
| 3) the prevention of public nuisance | <input checked="" type="checkbox"/> |
| 4) the protection of children from harm | <input type="checkbox"/> |

Please state the grounds for review (please see guidance note 1)

Abu Daniel is a Shisha Café at 161 Belgrave Gate Leicester.

The venue has a large open front to allow them to comply with the smoke free legislation. This means when the café plays loud music there is no insulation to reduce the level of noise leaving the building.

There are several residential properties in the vicinity of the café and the level of music is causing a nuisance to these residents.

To prevent public nuisance recurring, I therefore formally request a review of the premises licence for Abu Daniel 161 Belgrave Gate to remove the following from the list of licensable activities authorised by the licence.

Recorded music (indoors and outdoors)

Performance of a play (indoors and outdoors)

Indoor sporting event

Entertainment of a similar description to that falling within E, F or G (indoors and outdoors).

If you have made representations before relating to this premises please state what they were and when you made them

Not applicable

Please tick yes

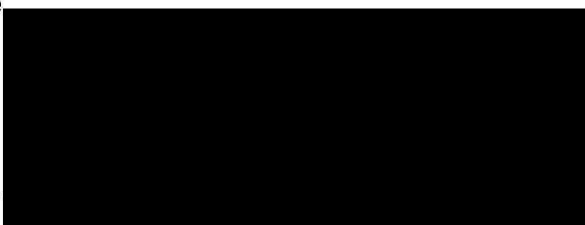
- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO 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 3 – Signatures (please read guidance note 3)

Signature of applicant or applicant's solicitor or other duly authorised agent (**See guidance note 4**). If signing on behalf of the applicant please state in what capacity.

Signature



.....
Date 13/10/2022
.....

Capacity: Pollution Control Officer, Leicester City Council
.....

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)

Post Town

Postcode

Telephone number for correspondence (if any)

If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)

Notes for Guidance

1. The ground(s) for review must be based on one of the licensing objectives.
2. Please list any additional information or details, for example dates of problems which are included in the grounds for review if available.
3. The application form must be signed.
4. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
5. This is the address which we shall use to correspond with you about this application.