## 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 Sarah Mason	
(Insert name of applicant)	
apply for the review of a premises licence unde	er section 51
Part 1 – Premises or club premises details	
Postal address of premises or, if none, ordnand	ce survey map reference or description
Blackbird News	
222 Blackbird Road	
Post town Leicester	Post code (if known) LE4 0AF
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Name of premises licence holder or club holdin Pirthrap Sriskandarsh	ig club premises certificate (if known)
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Number of premises licence or club premises of	outificate (if Imorra)
Number of premises ficence or club premises c	ertificate (ii known)
Part 2 - Applicant details	
I am	
	Please tick ✓ yes
	7.1
1) an individual, body or business which is not a responsible	
authority (please read guidance note 1, and compor (B) below)	lete (A)
or (B) below)	
2) a responsible authority (please complete (C) be	elow)
2) a responsible addition (predict complete (C) of	,
3) a member of the club to which this application	relates
(please complete (A) below)	

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

Please tick ✓ yes				
Mr Mrs Miss M	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 (if any)				
E-mail address (optional)				

## (C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address	
Leicestershire Fire and Rescue Service 4 Geoff Monk Way	
Birstall	
LE4 3BU	
Telephone number (if any)	
0116 210 5555	
E-mail address (optional)	
Firesafety.advisors@leics-fire.gov.uk	
Thesatety auxisors where sine gov. ax	
This application to review relates to the following lice	nsing objective(s)
This application to review relates to the following nee	using objective(s)
	Please tick one or more boxes ✓
1) the prevention of crime and disorder	
2) public safety	
3) the prevention of public nuisance	
4) the protection of children from harm	

Please state the ground(s) for review (please read guidance note 2)			
Failure to undertake a fire risk assessment.  Non-compliant with an enforcement notice under article 30 of the Fire Safety Order Failure to ensure the safety of employees and members of the public.			

Please provide as much information as possible to support the application (please read guidance note 3)

In October 2020, a fire broke out at 222 Blackbird Road. The fire crews at the time put up two domestic smoke alarms. Fire Protection Officer Cyril Abadie attended and confirmed that as part of the terms of his licensing he needed a fire risk assessment. He also advised to get interlinked alarms for the shop and the flat above.

Fire Protection Officer Vicky Finn attended on 9 December 2021 to undertake a fire safety audit. It was noted that no fire risk assessment had been undertaken, there were compartmentation issues between the shop and the flat, no interlinked alarms had been fitted, no training had been undertaken with employees, the escape routes were blocked with stock and the rear escape was locked with a key. Fire Protection officer Vicky Finn wrote to the owner advising how he can rectify these issues and gave a three-month timeline. An enforcement notice was issued under article 30 the Regulatory Reform (Fire Safety Order 2005).

On 16 March 2022 at 2pm, myself fire protection officer Sarah Mason and fire protection officer Sophie Smith attended for the follow up on the enforcement notice to ascertain what work had been carried out to ensure the enforcement notice had been complied with. I, FPO Mason, asked for a copy of the risk assessment, this hadn't been completed. I asked what training had been provided, the owner confirmed they'd had it 6 months before, I questioned this as the audit in December confirmed they hadn't had training and no training has been done since. The owner confirmed that hadn't sorted the compartmentation issues between the shop and the flat. The rear escape was still difficult to get to because of stock, the rear fire door was locked and the key left next to the door. An interlinked alarm was fitted between the shop and the flat above which was fitted by LFRS as an interim measure.

	Please tick ✓ yes
Have you made an application for review relating to the premises before	
If yes please state the date of that application	Day Month Year
If you have made representations before relating to the pre and when you made them	mises please state what they were

yes						
an	have sent copies of this form and enclosed the premises licence holder or club happropriate					
• I1	anderstand that if I do not comply with oplication will be rejected	the above requirements my				
IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.						
Part 3 – S	Part 3 – Signatures (please read guidance note 4)					
Signature of applicant or applicant's solicitor or other duly authorised agent (please read guidance note 5). If signing on behalf of the applicant please state in what capacity.						
Signature		· · · · · · · · · · · · · · · · · · ·	*****			
Date	22/03/2022					
Capacity	Fire Protection Officer		NO. 8. 8180			
associated	ame (where not previously given) and with this application (please read guinire Fire and Rescue Service onk Way		ā			
Post town		Post Code				
Birstall		LE4 3BU				
-	e number (if any) 0116 210 5555					
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)						

Please tick ✓