

LICENSING PANEL (LICENSING ACT 2003 FUNCTIONS) ADDENDUM 2 – APPENDIX B1

10.00AM, FRIDAY, 10 MAY 2024

COUNCIL CHAMBER, HOVE TOWN HALL, NORTON ROAD,
HOVE, BN3 3BQ - HTH/CC

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ADDENDUM

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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 appropriate.

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

WE { JACQUELINE KILBY, CHRISTOPHER HALSWORTH,
 VIRGINIA HALSWORTH AND LEIGH RUSH
 (Insert name of applicant)

apply for the review of a premises licence under section 51 / ~~apply for the review of a club premises certificate under section 87 of the Licensing Act 2003~~
~~for the premises described in Part 1 below (delete as applicable)~~

Part 1 – Premises or club premises details

Postal address of premises or, if none, ordnance survey map reference or description THE PARIS HOUSE, 21, WESTERN ROAD, HOVE, EAST SUSSEX	
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Post town BRIGHTON + HOVE	Post code (if known) BN3 1AE
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Name of premises licence holder or club holding club premises certificate (if known) ROWBELL LEISURE LTD

Number of premises licence or club premises certificate (if known) 1445/3/2012/03269/LAPRET

Part 2 - Applicant details

WE are

Please tick yes

- 1) ~~are~~ interested parties please complete (A) or (B) below
 - a) ~~are~~ persons living in the area of the premises
 - b) a body representing persons living in the area of the premises
 - c) a person involved in business in the area of the premises
 - d) a body representing persons involved in business in the area of the premises
- 2) a responsible authority (please complete (C) below)

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

Mr

Mrs

Miss

Ms

Other title
(for example, Rev)

Surname

KILBY

First names

JACQUELINE

I am 18 years old or over

Please tick yes

Current postal
address if
different from
premises
address

[Redacted] 2001

Post town

[Redacted]

Post Code

[Redacted]

Daytime contact telephone number

[Redacted]

E-mail address
(optional)

[Redacted]

(B) DETAILS OF OTHER APPLICANTS

Name and address

(i)

CHRIS + VIRGINIA HALSWORTH,

[Redacted]

Telephone number (if any)

E-mail address (optional)

(ii)

LEIGH RUSH,

[Redacted]

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address
Telephone number (if any)
E-mail address (optional)

This application to review relates to the following licensing 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

<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

Please state the ground(s) for review (please read guidance note 1)

The Applicants have been disturbed by noise nuisance caused by music, live and recorded, played within these licensed premises for a long period of time.

In addition, we have regularly been disturbed by the noise caused by customers both inside and outside the premises and before and after 2300.

The disturbance occurs in afternoons and evenings and on a large number of occasions after 2300. This has prevented us from sleeping and on some occasions has woken us from sleep. It can then be difficult to go back to sleep.

During the day the disturbance makes it difficult to work from our homes or relax in them.

These problems are worse in the Spring, Summer and Autumn.

Conditions on the licence designed to protect residents are either not observed, are confusing or have been relaxed until 2300.

Antisocial behaviour occurs due to customers congregating outside the premises shouting, clapping, swearing etc without thought for residents.

There is a long history of complaints about these premises which have not been properly addressed by the enforcement authorities.

Please provide as much information as possible to support the application
(please read guidance note 2)

The Applicants have prepared a detailed submission setting out the relevant law and practice and other aspects of this case. To that there is a series of appendices ("APPs") which relate to points made or referred to in the submission.

These appendices contain the Applicants' statements, noise diaries, photographic and video evidence and other relevant evidence, including some from former residents.

Information obtained from Brighton and Hove City Council under the Freedom of Information Act 2000 for the period 2016 - early August 2022 has been analysed by the Applicants and provides significant background and supporting evidence to the basis of this application - that two of the four licensing objectives (as specified on page 3) are not being promoted.

These premises are within the licensing authority's cumulative impact zone which exists because of the impact of licensed premises and alcohol related behaviour to those who live and work within it. It is thus especially sensitive to any failure to promote the licensing objectives.

All the Applicants' evidence (as outlined above) has been uploaded to a website at the suggestion of the City Council's licensing department and so all interested parties can have access to it and provide information relevant to this application.

Please tick yes

Have you made an application for review relating to this premises before

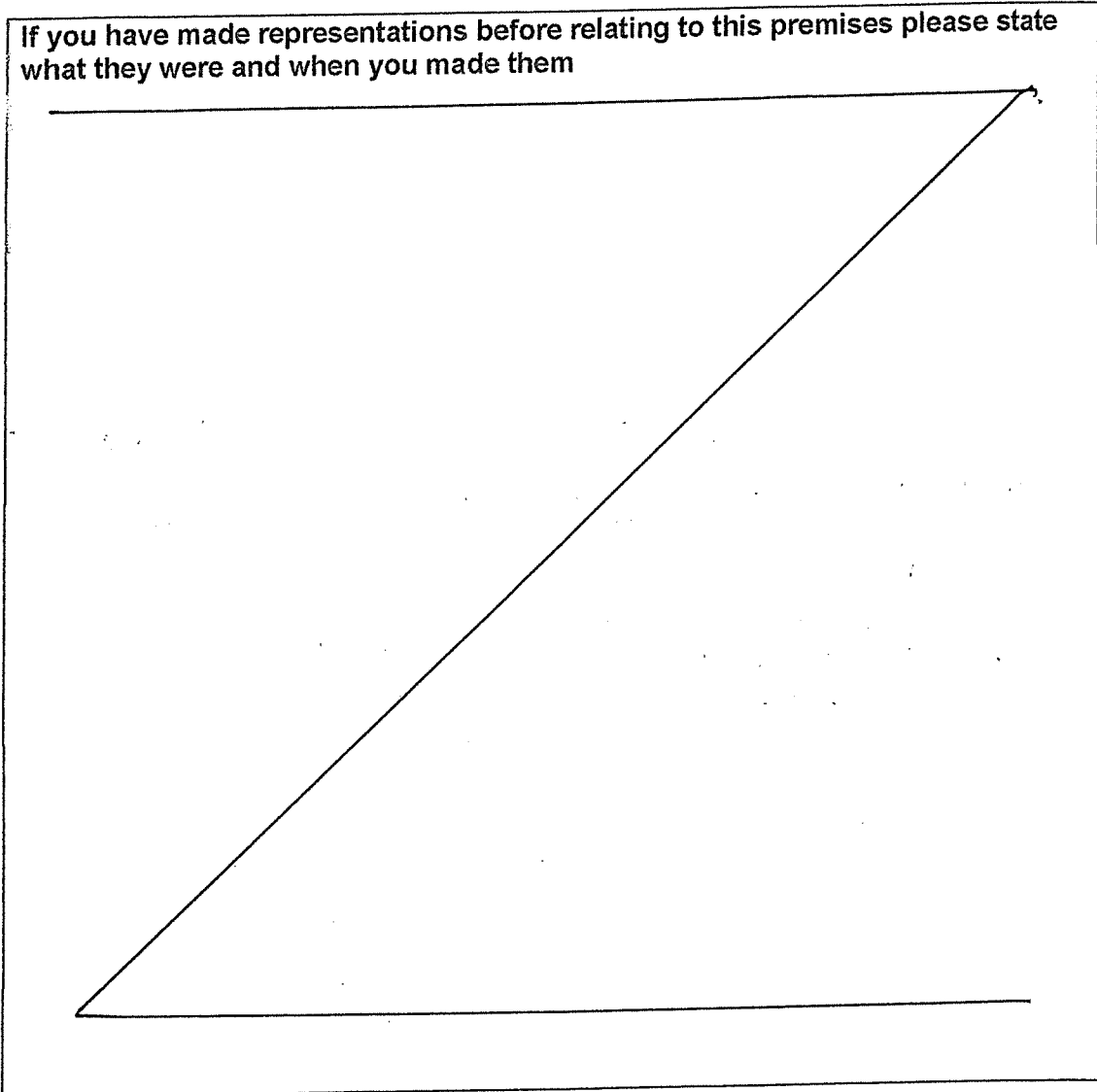
NO

If yes please state the date of that application:

M/J

Day	Month	Year

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



Please tick yes

- I have sent copies of this form and enclosures to the other persons 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.

Signatures of Applicants
Jac Killy (J. KILBY)
C. Hallsworth (C. HALLSWORTH)
L. Rosh (L. ROSH)

Date 8th February 2004

Capacity APPLICANTS

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5) <u>C. HALLSWORTH</u> <u>(address as above)</u>	
Post town	Post Code
Telephone number (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.