



**Representation made in respect of a Grant / Variation / Review of a Premises Licence or Club Premises Certificate**

**PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THE ATTACHED FORM.**

You have notified the Licensing Authority that you wish to make a representation concerning an application to Grant / Vary / Review a Premises Licence or Club Premises Certificate.

The law does not require a representation to be in a standard format however, Pendle Borough Council, as the Licensing Authority, is obliged to decide whether your application is valid within the requirements of the Act and Regulations.

Under the provisions of the Licensing Act 2003 (Hearings Regulations) 2005, the Licensing Authority requests that you clarify the grounds upon which you are making representations. This form will assist you in ensuring that you have entered your representations properly and fully.

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. You may use your copy as an aide memoir at a hearing before the Licensing Committee.

The ground(s) for representation must be based on one of the licensing objectives.

Please list any additional information or details to support your application and attach any documentary or other information that you may wish to use. If you have not disclosed this information, you will not be able to introduce it at the hearing unless all the other parties consent.

Please note that by ticking the section below which appears on page 5 of this form -

<b>I understand that the Licensing Authority is obliged to give notice of a hearing to all parties to the hearing and this must include a copy of this representation. (You must tick this box)</b>	<b>Yes</b> <input checked="" type="checkbox"/>
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and signing and dating the form, you are agreeing that a copy of your representation can be passed to the applicant and other associated parties.

If you do not want this to happen, you should contact the Licensing Office on 01282 661987 immediately and discuss it with an Officer. However, it should be noted that some or all of your personal details can only be withheld in exceptional and isolated circumstances and this course of action will only be considered where the circumstances justify such action.

Pendle Borough Council  
A Licensing Authority for the purposes of the Licensing Act 2003

## Section 1

I NICOLA ANNE SHARPLES

(insert name of person making representation whether as an individual or on behalf of a group or authorised to make a representation as a responsible authority)

make representations in respect of a GRANT / VARIATION / REVIEW \* of a;  
(delete as appropriate)

Premises Licence	<input checked="" type="checkbox"/>
Club Premises Certificate	<input type="checkbox"/>

Premises or Club Premises details:

Name, address and postcode of premises or club premises in respect of which you are making representations.	
Name of Premises	LE KOEKOEK
Address of Premises	87 GISBURN RD BARROWFORD, LANCs
Post code (if known)	BB9 6DX

I am;

Please tick as appropriate

a) a person	<input type="checkbox"/>
b) a body representing persons	<input type="checkbox"/>
c) a person involved in a business	<input checked="" type="checkbox"/>
d) a body representing persons involved in a business	<input type="checkbox"/>
e) a Responsible Authority	<input type="checkbox"/>
f) An elected Borough Councillor	<input type="checkbox"/>

## Section 2

Please provide your details below -


Details of individual / ~~Organisation~~ / ~~Responsible Authority~~  
(mark as appropriate)

Title: (please select)	Mr / <u>Mrs.</u> / Ms. / Miss / other:
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Surname	SHARPLES	First Name	NICOLA
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I am 18 years of age or older	<input checked="" type="checkbox"/>
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or

Name of the Organisation or Responsible Authority	
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Address Details:

Full contact address	 INGHAM STREET BARROWFORD LANCS
Postcode	BB9 6EG

Contact name	NICOLA SHARPLES
Daytime contact telephone number	
E-mail address	

### Section 3

Details of the licensing objectives which will be undermined by the application; grant / variation / review.

This representation relates to the following licensing objective(s):

(tick as appropriate)

The Prevention of Crime and Disorder	<input checked="" type="checkbox"/>
Public Safety	<input type="checkbox"/>
The Prevention of Public Nuisance	<input checked="" type="checkbox"/>
The Protection of Children from Harm	<input type="checkbox"/>

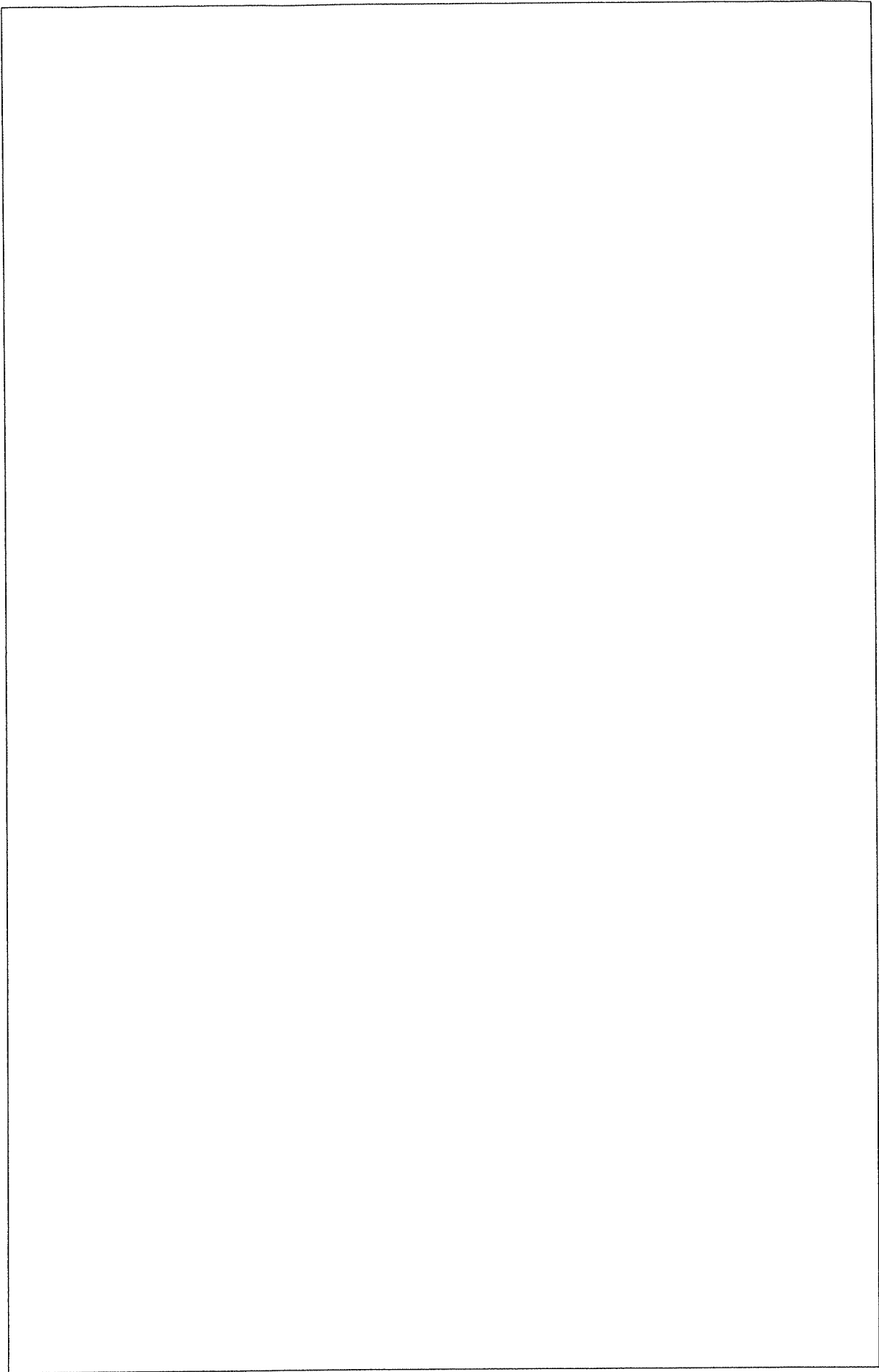
### Section 4

#### Information and details of the Representation

Please note that if your representations relate to the Variation of an existing Licence or Certificate, the representations can only relate to the variation of the Licence or Certificate.

Please provide as much information as possible to support your representation. Please note that if you have not disclosed this information, you may not be able to introduce it at the hearing unless all the other parties consent.

- As a business we already have to clear up bottles, glasses, sick, cigarettes around our shop after the weekends from [REDACTED] bar.
- We worry where people will go to smoke as there is only the pavement across from our shop.
- We are concerned it will discourage some of our customers coming in our shop if there are drinkers / smokers stood outside our shop.
- Parking in the area is already horrific
- Noise for us and our customers while we and the suggested bar is open.
- our neighbours have seen people urinating at the back of our shop (people from [REDACTED]) this is going to get worse.



## Section 5

Have you made any representations in respect of these premises before? <i>(Delete as appropriate)</i>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, date that you made representations		

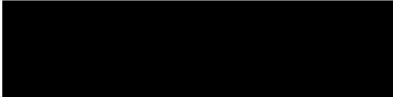
I understand that the Licensing Authority is obliged to give notice of a hearing to all parties to the hearing and this must include a copy of this representation. <b>(You must tick this box)</b>	Yes <input checked="" type="checkbox"/>
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IT IS AN OFFENCE, 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 OR REPRESENTATION.

## Section 6

### Signatures

Signature of person making representation or a solicitor or other duly authorised agent. If signing on behalf of a body representing a person living or carrying on a business in the vicinity of the premises or on behalf of a responsible authority, please ensure that have the right to sign a representation on their behalf and state the capacity in which you are signing.

Signature	
Date	15/5/26
Capacity	Director

**Once fully completed please return via the following methods:**

<b>POST</b>	Licensing Section, Town Hall, Market Street, Nelson, Lancashire BB9 7LG
<b>EMAIL</b>	licensing@pendle.gov.uk

Please ensure this form is received **before** the last date of representations  
(This can be found on the Public Notice or contact Licensing on 01282-661987)