

**LICENSING ACT 2003**

**REPRESENTATION (OBJECTION FORM)**

<b>Section 1 - Objectors Details</b>	
Full Name	
Home Address	
Business Address (if applicable)	
Daytime phone number	
Email	
Fax number	

<b>Section 2 - Application Details</b>		
Name of premises you are making a representation about		
Address of the premises you are making representation about		
	(Tick as appropriate)	
Application for a:	Premises Licence	
	Club Premises Certificate	
Application to vary an existing:	Premises Licence	
	Club Premises Certificate	

If you are representing residents or businesses, please complete the boxes below and attach any additional sheets showing the details of those you have been requested to represent.

Organisation's name (if applicable)	
Please state nature of representation, for example, Residents' Association, Ward Councillor, MP or Trade Association	

You need to complete the next section as fully as possible. If you do not, the Sub-Committee may not understand why you are making representation. Try to be as specific as possible and give examples.

<b>Which of the four licensing objectives does your representation relate to?</b> (Tick as appropriate)	(✓)	<b>Please detail the evidence supporting your representation, or the reason for your representation.</b>  <b>Please use separate sheets if necessary.</b>
<b>Prevention of crime and disorder</b>		
<b>Public safety</b>		
<b>Prevention of public nuisance</b>		
<b>Protection of children from harm</b>		

(Tick as appropriate)	
	I object to the application being granted at all
	I object to the application being granted in its current form *
<ul style="list-style-type: none"> <li>If you choose this option, remember to inform us in the next section what changes you would like to see.</li> </ul>	
<p>Are there any changes you would like to see which the applicant could take which would address your concerns?</p> <p>If yes, please give details.</p>	

If you make representation we will invite you to attend the Licensing Sub Committee hearing.

**Please note:** You should be aware that the applicant will normally be given a copy of all representations received and if a licensing application is to be considered by a Committee of the Council, any representation received will be made available in a publicly available report submitted to that Committee.

Signature	
Name	
Date	

Please return this form along with any additional sheets/supporting information to:

Licensing Team, Harlow Council, Civic Centre, The Water Gardens, Harlow, Essex, CM20 1WG or email: [licensing@harlow.gov.uk](mailto:licensing@harlow.gov.uk)

You must return this form within the statutory period. You can find details of the statutory period deadline on the Council's website at <http://www.harlow.gov.uk/licensing-notice>

You may also check this with the Licensing Team on 01279 446005 or 446009.