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 orth, THOUSE KILBY, CHRISTOPHER HALLS WORTH, E VIRGINIA HOUSENORTH AND LETCH RUSH
TOUCOUGHINE KILBY, CHRISTOPHER HALLS MOINT
E? VIRGINIA HALLSWARTH AND LETGH RYSH

(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 T332 TC THE PARIS HOUSE. 21, WESTERN ROAD, HONE. EAST SUSSIE Post town Post code (if known) BRIGHTON +HOUE BN3 IAE Name of premises licence holder or club holding club premises certificate (if known) ROWBELL LEISURE Number of premises licence or club premises certificate (if known Part 2 - Applicant details ben We are Please tick yes 1) arinterested partygelease complete (A) or (B) below) a) a personsliving 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)

a member of below)	the club to which t	this applicati	on relates (p	lease comple	te (A)
(A) DETAILS O	F INDIVIDUAL AP	PPLICANT (f	ill in as appli	cable)	
Please tick Mr ☐ Mrs	☐ Miss	☐ Ms		Other title (for example,	Rev)
Surname		· · · - F	irst names		
KICB	4		JACQU	IELING	
I am 18 years o	ld or over			Pleas	e tick yes
Current postal address if different from premises					
address			2001	: ,	
Post town			Post Cod	е	
Daytime contac	t telephone numb	ber			
E-mail address (optional)				\	
(B) DETAILS O	F OTHER APPLIC	CANTS		; ·	
Name and addre					
(i) CH	RIS + VIRGIN	NH HE	<i>رییښه</i> د۲	et,	,
Telephone numb	er (if any)			,	
E-mail address (optional)				
(ii) LE	IGH RUSH	1			

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Telephone number (if any) E-mail address (optional)	Name and address
Telephone number (if any) E-mail address (optional)	
Telephone number (if any) E-mail address (optional)	
Telephone number (if any) E-mail address (optional)	
Telephone number (if any) E-mail address (optional)	
Telephone number (if any) E-mail address (optional)	
E-mail address (optional)	the state of the s
E-mail address (optional)	
	Telephone number (if any)
The state of the s	

This application to	review relates to	the following	licensing objective	re(s)
			Please tick one or	prore 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 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.

To 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 worken 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 below in her.

These problems are worse in the Sphing, Summer and Autumn

Conditions on the hience designed to snote tesidents are either not observed, are confusing or home been relaxed until 2300:

Antiocial benavious occurs due to customers conducating outside the premises shouting, clapping, sweating etc without Hought 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 a brained from Brighton and Hove City Council under the Freedow of Information Ad 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 - Itrat two of the four licensing abjectives (asspecified on page 3) are not being promoted.

These promises are within the licensing authority's our wlative inpuct some 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 gronote the licensing objectives.

All the Applicants' endence (as outlined above) has been uploaded to a website at the engestion 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 relatir	ng to this premises before
If yes please state the date of that application	MIN Day Month Year

	when you made t			<u> </u>
,		. /		
*, *				
	/			
			•	
		•		

 I have sent copies of this form and and the premises licence holder or certificate, as appropriate I understand that if I do not comply my application will be rejected 	club holding the club premises
IT IS AN OFFENCE, LIABLE ON CONVICTHE STANDARD SCALE, UNDER SECTION MAKE A FALSE STATEMENT IN OR APPLICATION Part 3 – Signatures (please read guidan	ION 158 OF THE LICENSING ACT 2003 IN CONNECTION WITH THIS ce note 3)
Signature of applicant or applicant's so (See guidance note 4). If signing on beha capacity. Signatures of Applicants Date Sh February 200	ulf of the applicant please state in what CARUSWOTH LAGH L. RUSH)
Capacity ARRLICANTS Contact name (where not previously given	ren) and postal address for
correspondence associated with this ap C. HALLSWORTH (add/1888 as a	
Post town	Post Code
Telephone number (if any)	6
If you would prefer us to correspond wit mail address (optional)	th you using an e-mail address your e-

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.

 The application form must be signed.

 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.