

**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 PC 20418 Dean WALL of West Mercia Police

(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**

Quality Fish and Chips
76 Bye Street
Ledbury
Herefordshire

Post town Ledbury

Post code (if known) HR8 2AG

**Name of premises licence holder or club holding club premises certificate (if
known)**

JASKARN KAUR

Number of premises licence or club premises certificate (if known)

PR01019

Part 2 - Applicant details

I am

Please tick ✓ yes

1) an individual, body or business which is not a responsible
authority (please read guidance note 1, and complete (A)
or (B) below)

☐

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 ✓ yes

Mr

☐

Mrs

☐

Miss

☐

Ms

☐

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 PC 20418 Dean WALL on behalf of West Mercia Police Licensing Officer (Herefordshire) West Mercia Police Hereford Police Station Bath Street Hereford HR1 2HT
Telephone number (if any) [REDACTED]
E-mail address (optional) [REDACTED]

This application to review relates to the following licensing objective(s)

- 1) the prevention of crime and disorder
- 2) public safety
- 3) the prevention of public nuisance
- 4) the protection of children from harm

Please tick one or more boxes ✓

☒
☐
☐
☐

Please state the ground(s) for review (please read guidance note 2)

This review is being launched under the licensing objective Prevention of Crime & Disorder following a visit by West Mercia Police and Immigration Officers where three individuals were detained under the Immigration Act.

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

West Mercia Police are launching this review under the licensing objective, Prevention of Crime & Disorder. This is following Operation Gambit, a Multi-Agency Tasking and Enforcement exercise conducted on Thursday 11th July 2024.

The licensed premise in question, Quality Fish and Chips, 76 Bye Street, Ledbury, Herefordshire HR8 2AG was found to be committing offences under the Immigration Act. A number of persons living/working on site were arrested.

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

1

Day Month Year

--	--	--	--	--	--	--	--



- I have sent copies of this form and enclosures to the responsible authorities 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

7

7

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 – 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

[REDACTED]

.....
.....

Date 15/07/2024

.....
.....

Capacity Constable

.....
.....

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6)

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. A responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
2. The ground(s) for review must be based on one of the licensing objectives.
3. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
4. The application form must be signed.
5. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
6. This is the address which we shall use to correspond with you about this application.