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| Please return this form, and any additional information within the statutory period to:  **The Licensing Section,**  **Herefordshire Council,  Plough Lane, Hereford. HR4 0LE**  **licensing@herefordshire.gov.uk** |

HEREFORDSHIRE COUNCIL

##### Licensing Act 2003

# REPRESENTATION FORM – INTERESTED PARTIES

On making your representation please have regard to the ‘Making Representations Guidance Notes’ which further explains the process and the information that can be considered by the licensing authority.

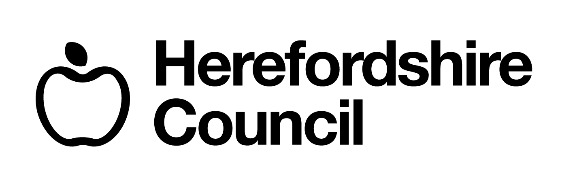
**When completing this form please print clearly and legibly.**

|  |  |
| --- | --- |
| **Your Name:** | **Contact Telephone No.** |
| **Address:** | **E-mail address:** |
| **Please state your interest in the premises you are making a representation about: eg local resident/local business** |
| **Name & Address of premises you are making a representation about:** | |

**DATA PROTECTION ACT 1998. Please indicate by ticking here ….. if you are not content for your personal details to be circulated as necessary prior to any hearing .**

A representation must reflect one or more of the licensing objectives, therefore please write the details of your representation in the relevant boxes below:

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| To Prevent Crime & Disorder |
| Public Safety |
| **To Prevent Public Nuisance** |
| **To Protect Children from Harm**  Signed:  Date:  If you have any queries about this form or are unsure of when the statutory period ends please contact **Licensing on licensing@herefordshire.gov.uk** |



# Representation Form – Interested Parties

**Suggested Conditions**

**Premise:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

It would help us with this application if you could suggest conditions you would be happy for the premise to operate under to rectify the problems you are experiencing.

All suggested conditions shall be considered in line with the Herefordshire Council Licensing Policy, the Licensing Act 2003 and the Licensing Objectives.

|  |
| --- |
| To Prevent Crime and Disorder |
| Public Safety |
| **Prevent Public Nuisance** |
| **Protect Children from Harm** |

Signed:

If you have any queries about this form or are unsure of when the statutory period ends please contact **Licensing at licensing@herefordshire.gov.uk**

Date: