

Licensing Act 2003 – Representation Form

Personal Deta	IIIS					
Title: Mr	Mrs	☐ Mis	s 🗌	Ms 🗌 O	ther 🗌 (please specify)	
First Name:	Paul			Surname:	Gordon	
Address: Civic Centre, Walsall Council, Darwall Stre					reet, Walsall	
Postcode: Ws1 1TP						
Contact Detai		Email	:			
			Mobil	e:		
Premises Details (please give as much information as possible)						
Application Ref:		e give as i	TIUCITII	ποιτηαιίοτι αδ μ	0331016)	
Name of Premises		Jays Juicez				
Address of Premises:		30 Goodall Street, Walsall, WS1 1QL				
		· · · · · · · · · · · · · · · · · · ·				
Reasons for Representation						
Please provide your reasons under the relevant licensing objective below.						
You are not required to complete all sections. Complete only those that you consider are relevant to your representation.						
The Prevention of Crime and Disorder						
As part of the 2020 review of the Statement of Licensing Policy Responsible authorities						
provided evidence that the WS1 post code area for Walsall were saturated with licensed premises ('on/off licences' and late night refreshment) and the level of saturation was						
having a significant cumulative effect, which undermined the licensing objectives.						
In light of the number of licensed premises with both off sales/on sales and also late night						
refreshments an additional premises within this area will add to the saturation that is						
already there and have an impact with the increased footfall which will then have a cumulative impact in the local area which would undermine the licensing objectives of						
Crime & Disorder and Public Nuisance with the gathering of additional people within the area covered by the Cumulative Impact Policy.						
The Prevention of Public Nuisance						
THE FIGURE OF FUNDING HUISUING						
Public Safety						
The Protection of Children from Harm						
In accordance with the provisions of the Licensing Act 2003, the Licensing Authority is required to include all personal details in the Committee report. Should there be						
exceptional circumstances, which require the protection of your identity, please explain the reasons below:						

Declaration					
I confirm that the information I have provided is true and correct.					
Signed:	Dated: 26.10.21				