



LICENSING ACT 2003 -REPRESENTATION FORM (INTERESTED PARTY)

On completion this form and any additional sheets or other accompanying documentation should be returned to; The Licensing Team, Public Protection Division, Gheltenham Borough Council, PO Box 12, Municipal Offices, Promenade, Cheltenham, Glos. GL50 1PP. e mall: licensing@cheltenham.gov.uk

Please Indicate in which capacity	ou are making th	nls representation by ticking a box below	
 A person living in the vicini 			. 12
 A body representing a pers 	on in the vicinity	of the premises	
 A person involved in a busi 	ness in the vicini	ty of the premises	
 A body representing a busi 			
(Jeneseum)	SE A SESSION PROCESSION	As agreement proportional a	
Contact details (of persor	n completing	form)	
Name:	CLIVE	HIXSON	2
Name of the corganisation/body/person you represent (if appropriate)			
Your,full Postal Address or that of the organisation or body you represent	FLKT 24	SOMERSET HOUSE KNAPP ROAD CHELTENHAM	
Post Code	GL50	3 Q Q	
Daytime contact telephone number			
	to correspond via	ı emall, please enter your emall address.	Ē
(optional).		<u> </u>	
Details of person/body ma	kina represe	entation (If different from above)	
Name of the person/organisation/body, (as appropriate)	inng roprose	, , , , , , , , , , , , , , , , , , ,	
Full Postal Address of the person/organisation or body making representation of	•		
Post Code			
Daytline contáct teléphone number			
Email address - If they would prefer to (optional).	o correspond via	emall, please enter their email address.	•

Premises/Club Details

Name of premises/club you are making representation about	BOTTLE OF SAUCE LTD.
Name of Applicant for Licence (If Known)	ARKELLS BREWERY
Postal Address!	AMBROSE TERRACE CHELTENHAM
Post Code:	GL50 3LH

What are you making a representation about?

Please indlicate which part of the licence/certificate application you are making a representation about
(eg crime, disorder, noise, disturbance etc)
PREVENTION OF PUBLIC NUISANCE.
(NOISE AND DISTURBANCE)
· g

Which of the Licensing Objectives does your representation refer to?

(Note: Your representation <u>must</u> relate to one or more of the four Licensing objectives. Please indicate the objective(s) your representation relates to.)

Licensing Objective	lease tick ✓ for Yes	Licensing Objective
The prevention of crime and disorder		Public safety ·
The prevention of Public nulsance		The protection of children from harm
Information on the Licensing Act 2003	and the Act's	s objectives is available from the Department of Media, Culture

Discontinuity of the distance (in motres)			
Please indicate the distance (in metres): between your address and the premises subject of your representation:	APPROX:	75 M.	:

What are your concerns?

Please provide full détails of your conceins régarding the application and include of enclose with the form any evidence you may have in support of it. (Please continue on a séparate sheet if necessary)

PAISED NOISE LEVELS DURING UNSCENBLE HOURS FROM MUSIC EMITTING FROM THE PREMISES (BETTLE OF SAUCE) AND CUSTOMPRS LEAVING THE PREMISES LATE AT NIGHT WALKING ALONG KNAPP RD., TO GET TO THEIR PARKED VEHICLES CAUSING A DISTURBANGE TO RESIDENTS WHICH IS UNACCEPTABLE AND HAS AN EXPECT ON OUR QUALITY OF LIFE!

Please use the box below to suggest any sultable conditions that if agreed in advance of a hearing by the applicant would allow you to withdraw your representation or that the committee could add to the licence (if granted) that would remedy your concern. You may also use this box to enter details of any other matters not commented on elsewhere relating to your representation; that you would like the committee to take into account.

(Please continue on a separate sheet if necessary)

REDUCTION OF THE OPENING HOURS AND A.

REDUCTION IN THE MOISE LEVEL OF MUSIC EMITTING FROM
THE PREMISES,

Signature:		
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afet 1552000		





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Contact details (of person completing form)
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'Name of the correspondence of the correspon
Your full Postal Address of that FLM ZU SON ERSET HOUSE of the organisation or body you KNOPP RD CHECTENHAM
Rost Code GLSO 3QQ
Daytime contact telephone inumber.
Emall address - If you would prefer to correspond the small address, (optional).
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Náme of the person/organisation/body, (as appropriate)
Full Postal Addréss of the person/organisation or body making representation of
Post Code
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Premises/Club Details

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Name of Applicant for Licence	ARKELLS BREWERY
	AMBROSE TERRACE
Postal Address!	CHELTENHAM.
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Post Code:	(5L50 3LH

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PREVENTION OF PUBLIC NUISANCE
(Noised DisturBANCE)

Which of the Licensing Objectives does your representation refer to?

(Note: Your representation <u>must</u> relate to one or more of the four Licensing objectives. Please indicate the objective(s) your representation relates to.)

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Please tick ✓ for Yes	Licensing Objective	
	Public safety	
	The protection of children from harm	
03 and the Act's	 s objectives is available from the Department of i re.gov.uk.	Media, Culture
	33 and the Act	Public safety

		1	
Please indicate the distance (in metres) between your address and the premises subject of your representation:	APPIROX	75 METRES	115

What are your concerns?

Please provide full détails of your concerns regarding the application and include or enclose with the form any evidence you may have in support of it. Please continue on a séparate sheet if necessary)

EXCESSIVE NOISE LEVELS DURING UNSOCIABLE HOURS
FROM THE MUSIC COMING FROM THE PREMISES
(BOTTLE OF SAUCE) AND CUSTOMERS LEAVING THE PREMISES
LATE AT NIGHT WALKING ALONG KNAPP ROAD, TO GET
TO THEIR PARKED CARS CAUSING A DISTURBANCE TO
RESIDENTS WHICH IS UNACCEPTIBLE AND HAS AN EAVECT
ON OUR QUALITY OF LIFE!!

Pléase use the box below to suggest any sultable conditions that if agreed in advance of a hearing by the applicant would allow you to withdraw your representation or that the committee could add to the licence (if granted) that would remedy your concern. You may also use this box to enter details of any other matters not commented on elsewhere relating to your representation that you would like the committee to take into account.

(Please continue on a separate sheet if necessary)

· A REDUCTION OF OPENING HOWRS AND A REDUCTION IN THE NOISE LEVEL OF Music Coning FROM THE PREMISES.

Signature:	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	****
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Capacity)	RETIRE)	
Ďate:		
	15/2/2017	

17/00181 / PRMV



Part 2

LICENSING ACT 2003 -REPRESENTATION FORM (INTERESTED PARTY)

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	0	A person involved in a business in the vicinity of the premises	-
	ø	A body representing a business in the vicinity of the premises	-

Contact details (of person completing form)

Name:	SUE DODSON (MS)		
Name of the . organisation/body/person you represent.((fappropriate)	CASONO (AIS)		
Your full Postal Address of that of the organisation or body you represent	18. SOMERSET HOUSE. KNAPP ROAD. CHELTENHAM		
Rost Code	GL503QQ		
Daytime contact telephone number. Emall address - If you would p (optional). Details of person/body Name of the person/body; (appropriate)	above)		
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ost Codé aytime contact teléphone umber			
	o correspond via email, please enter their email address.		

Part 2 Continued

Premises/Club Details

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Pöst Gode:	GL50 3LH

What are you making a representation about?

Please indicate which part of the licence/certificate appl	lcatlon you are making a
(eg crime, disorder, noise, disturbance etc)	
NOISE CLIVE/Amplified/Recorded	. music)
EXTENSION OF CLOSING TIMES	(on additional days)
DISPERSAL ANTI-SOCIAL ACTIVITY	

Which of the Licensing Objectives does your representation refer to?

(Note: Your representation <u>must</u> relate to one or more of the four Licensing objectives, Please indicate the objective(s) your representation relates to.)

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Subject of Your representation was the same	Carry Control of the

Part 2 continued

What are your concerns?

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Capacity)				
Ďate:			The state of the s	

274 February 2017.

Part 2 (continued) :- What are your concerns?

I experienced no problems between the premises opening in December 2016 and mid-January 2017 and have no reason to complain about the Licensed Premises' current Sunday to Thursday operations which appear to be carried out in a responsible manner.

However, between mid-January and mid-February I was particularly aware of two issues connected with The Bottle of Sauce's late night operations:-

a) High levels of repetitive thumping 'bass' noise from live/amplified or recorded music occurring around midnight to 1,00am on Friday and Saturday nights. This is clearly audible in my (double-glazed) bedroom with the window closed. Should the same levels of noise occur in warmer weather when windows are open, this would be barely tolerable.

I am concerned that during renovation of the Licensed Premises it appears the ceiling was opened to rafter-height and the majority of soft furnishings removed. It does not seem any sound-insulation/vibration-limiting materials have been installed in this old building.

b) While unable to attribute directly to 'The Bottle of Sauce' but particularly noticed since early/mid January, there has been a significant increase in the number of pools of vomit in a direct line west between 'The Bottle of Sauce' and my home in Knapp Road, and to the east between the Licensed Premises and the nearby Manchester Court Care Home in Clarence Street. Coincidentally these incidents increase on the two nights when live music events currently occur at the venue.

It would seem the existing permission to operate live music during extended hours on Friday and Saturday nights is already causing problems of noise and may be contributing to the anti-social results of over-indulgence by the venue's patrons.

I do not consider extending opening hours and/or permitting live events seven nights a week to be reasonable or acceptable to people living in nearby residential properties.

As 'The Bottle of Sauce' has only operated during this short (winter) period, I have not observed/cannot comment on on-going problems resulting from late-night dispersal of its patrons. I consider this will also become a disturbing factor in summer months when windows are open more frequently.