## APPENDIX E

2 1 MAR 2012

Interested Party Repre (Form IPR1)	esentation		
(			
Section 1 – Licence application details			
Please indicate as appropriate :  √ I wish to object to the follow  ☐ I wish to support the follow			
Applicant name (if known): Frontiers Sales Limited			
Applicant premises name and address: Frontiers Sales Limited, 173-179 New Road Side, Horsforth, Leeds, LS18 4D.R			
Application for a	Premises Licence √ Club Premises Certificate		
Application to vary an existing	Premises Licence  Club Premises Certificate		
Section 2 – Your personal details	tive allows as to Costion 2		
NB : If you are acting as a representative, please go to Section 3.			
Title	Mr 🗌 Mrs 🗎 Miss 🗎 Other		
Surname			
First name(s)			
Address (incl postcode):			
	SCANNED		
It is essential that you provide your full residential address (or business address if you are objecting from a business). The Licensing Authority needs to be satisfied that you live or have business on the vicinity of the premises. Without this information your representation will not be accepted.			
Please note that a full copy of your representation (including your name and address) will be sent to the applicant and will be a public document at any hearing of this matter.			

Please refer to our Guidance Note – GN-M Guidance on making representations for further information and alternative options.

Section 3 – Representative details			
If you represent residents or businesses	in the vicin	ity please complete details below	
Name of Representative/ Organisation	Horsforth	ı Town Council	
Full postal address (incl postcode)	Horsforth Town Council Mechanics Institute Town Street Horsforth Leeds LS18 4HD		
Please indicate capacity :			
E.g. Representative of Residents Asso Ward Councillor Parish Council MP Trade Association Other (please specify)	ociation	□ ✓ □ □	
Section 4 – Representation grounds			
The representation is relevant to one or more of the following licensing objectives:		Prevention of crime and disorder Prevention of public nuisance Protection of children from harm  □	
Please tick relevant box(es)		Public safety	
Please select :			
☐ I object to the application being granted at all			
$\square$ I object to the application being gran	ited in its cu	Irrent form*	
*If you choose this option remember to see.	tell us in th	e next section what changes you would prefer to	
The grounds of the representation is	s based on	the following:	
	public nuis	the sale of alcohol by retail every day during ance for local residents with customers	

p		
You need to complete this box as fully as possible. If you do not the Licensing Authority may not be		
able to assess the relevance of your rep	presentation.	
Please attach supporting documents/further pages as necessary – please number all additional		
pages.		
Too. be be as an either as a consistence and air		
Try to be as specific as possible and give examples, e.g. on 1 February I could hear loud music from the premises between 10pm and 1am. I am concerned that if the premises open until 2am this will		
cause a nuisance to me and other resid		
Cause a fluisance to the and other resid	ents of the street.	
Signed: T Ferry	Date: 21/03/2012	

