Telford & Wrekin COUNCIL

Representation in respect of Review of a Premises Licence/Club Premises Certificate under the Licensing Act 2003

Please read the following instructions first

Representations **must** be made to the Licensing Authority in writing.

Failure to observe the requirements may invalidate it.

You are not obliged to use this form to make a representation and you may make a representation by letter if you wish. This form is intended to assist you.

- If you are completing this form by hand, please print.
- Please ensure your answers are inside the boxes and written in black ink.
- You may use additional sheets if necessary.
- You may wish to keep a copy of the completed form for use by you at any hearing held by the Council or the Magistrates Court as a result of this representation.

I/we, the undersigned, hereby make representation, in respect of an application for Review of a Premises Licence/Club Premises Certificate

Details of premises or club premises:	
Name of Premises/Club	**High Street Off Licence**
Address	**45A HIGH STREET WELLINGTON**
Post code	**TF1 1JW**

Details	
I confirm that I am (Please tick one only)**:**	
1) An interested party (as defined below)	
a) A person living in the vicinity of the premises (please complete section A below)	
b) A body representing persons living in the vicinity of the premises (Please complete section B below)	
c) A person involved in business in the vicinity of the premises (please complete section A below)	
d) A body representing persons involved in business in the vicinity of the premises (please complete section B below)	
2) A responsible authority (please complete section C below)	X

If you do not fall into one of the above categories you may not be entitled to make a representation.

Section A - Details of Individual	
Title	
Surname	
Forenames	
Address	
Post code	
Daytime Telephone	
E-mail (optional)	

Section B - Details of a Body Making Representations	
Name of person completing form	
Name of Body	
Address	
Post code	
Daytime Telephone	
E-mail (optional)	

Section C - Details of Responsible Authority Making Representations

Contact Name	PC 3484 Sharon MAJOR
Name of Authority	West Mercia Police
Address of Authority	MALINSGATE Police Station MALINSGATE TELFORD
Post code	TF3 4HW
Contact Telephone	[redacted]
Email	[redacted]

This representation relates to the following licensing objectives(s)
(Just ticking a box does not constitute a valid representation. The grounds of the representation **must** be described also and must relate to one or more of these objectives.)

Please tick one or more boxes *	
1) The prevention of crime and disorder	X
2) Public safety	
3) The prevention of public nuisance	
4) The protection of children from harm	

*** If your representation does not relate to one of the above it will not be valid.**

Please state the ground(s) for the representation and how it relates to one or more of the licensing objectives.
If the grounds are not set out below or on an accompanying sheet this representation will be deemed invalid. (Please use additional blank sheets if necessary) On behalf of West Mercia Police, I fully support the review hearing of the above-mentioned premises. I have attended the premises on several occasions over the past few years whereby Trading Standards have located and seized suspected counterfeit tobacco. The sale and distribution of counterfeit tobacco is widely recognised as being linked to serious and organised crime and undermines the licensing objective of the prevention of crime and disorder.

The repeated discovery of suspected illicit tobacco products demonstrates a continuing disregard for legal requirements In my view, this ongoing behaviour highlights a clear lack of respect for the law and raises significant concerns regarding the management and operation of the premises. I do not have confidence that the premises licence holder can be relied upon to uphold the licensing objectives, particularly the prevention of crime and disorder. Considering the above, I fully support the revocation of the premises licence as being both appropriate and proportionate in the circumstances.

Please tick	
• I understand that this representation will be put before a Licensing Sub-Committee and if the decision of that Sub-Committee is appealed against, a hearing in the Magistrate's Court.	x
• I understand that this representation may become a public document, that a full copy will be sent to the applicant and that it will be scrutinised by members of the Licensing Sub-Committee hearing that will be held.	x

It is an offence, under section 158 of the Licensing Act 2003, to knowingly or recklessly make a false statement in connection with this representation. This is punishable, upon conviction, by a fine of up to £5,000.

This representation must be signed by:

- an individual making a representation or
- a person authorised to do so by
- a body representing persons living in the vicinity of the premises or
- a body representing persons involved in business in the vicinity
- of the premises, or
- a person authorised to do so by a Responsible Authority.

Signed ……Sharon MAJOR…… Date ……14.10.2026……

Print Name…PC 3484 Sharon MAJOR……..

Address for correspondence
Contact address (if different)