

TITLE	MALTHURST SWALLOWFIELD, SWALLOWFIELD BYPASS RG7 1LZ APPLICATION FOR NEW PREMISES LICENCE
FOR CONSIDERATION BY	Sub Committee of the Licensing and Appeals Committee on 26 January 2015
WARD	Swallowfield
STRATEGIC DIRECTOR	Paul Anstey, Joint Service Delivery Manager for Environmental Health & Licensing

OUTCOME / BENEFITS TO THE COMMUNITY

In accordance with S18 of the Licensing Act 2003 and the Wokingham Borough Council Licensing Policy, the application is referred to the Licensing and Appeals Sub Committee for determination as a representation has been received.

RECOMMENDATION

The Sub Committee to determine the application to grant or refuse the application, with conditions and/or amendments as appropriate.

SUMMARY OF REPORT

To provide relevant information for the Sub Committee to consider and determine the application by Malthurst Limited for a new premises licence for Malthurst Swallowfield, Swallowfield Bypass, Reading RG7 1LZ

Background

The application for a new premises licence was received on 26 November 2014.

The following documentation is attached – copy of the application (Appendix One), location / layout plans (Appendix Two) and representation (Appendix Three)

The application was checked and confirmed to be correctly made. The 28 day consultation period ran until 24 December 2014. The responsible authorities, ward members and parish council were advised of the application by email on 27 November 2014.

Details of the application are as follows:

Petrol forecourt store situated at Swallowfield Bypass which will sell a wide range of convenience store goods

Late Night Refreshment:

- 2300 to 0500 Monday to Sunday

Sale by retail of alcohol (for consumption off the premises only):

- 0000 to 2400 Monday to Sunday

Hours premises are open to the public:

- 0000 to 2400 Monday to Sunday (24 hours)

The application has been advertised correctly, with site notices displayed at the premises (checked 2 December 2014) and a notice placed in the Reading Chronicle on 27 November 2014.

During the statutory consultation period of 28 days, representation was received from Darrell Gale on behalf of the Wokingham Borough Council Public Health Department.

Responses from Responsible Authorities

Thames Valley Police – no objections

Fire Authority – no representation

Environmental Health – no objections

Health & Safety – no response

Trading Standards – no response

Planning – no objection

Children and Young People's Services – no response

Primary Care Trust – representation (see below)

Representations from Primary Care Trust

Representation was received from Darrell Gale on behalf of the Wokingham Borough Council Public Health Department, this is attached as Appendix Three.

Analysis of Issues

Promotion of the four licensing objectives:

- the prevention of crime and disorder
- public safety
- the prevention of public nuisance
- the protection of children from harm

Section Q of the application details how the applicant proposes to address these.

Requirement of Licensing Act 2003 to determine an application and achieve the four licensing objectives – prevention of crime and disorder, public safety, prevention of public nuisance and protection of children from harm.

Wokingham Borough Council's licensing policy – operating hours – the council recognises that one important aspect of the Licensing Act 2003 is the abolition of national opening hours for premises selling alcohol and will only determine the opening hours of any licensable activity if there is the belief that by limiting the operating hours one or more of the licensing objectives will be met.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	Not applicable		
Next Financial Year (Year 2)	Not applicable		
Following Financial Year (Year 3)	Not applicable		

Other financial information relevant to the Recommendation/Decision

None

Cross-Council Implications (how does this decision impact on other Council services and priorities?)

Not applicable

Reasons for considering the report in Part 2

None

List of Background Papers

Application forms, location plans, representation

Contact	Karen Court	Service	Licensing Service
Telephone No	01635 519791	Email	k.court@westberks.gov.uk
Date	7 January 2015	Version No.	1

**Application for a premises licence to be granted
under the Licensing Act 2003**

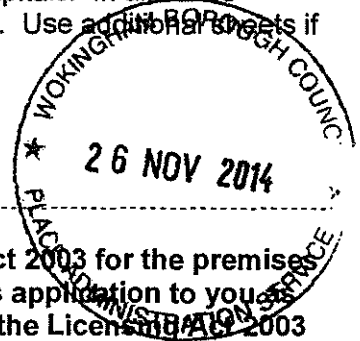
PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form.
If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.
You may wish to keep a copy of the completed form for your records.

I/We Malthurst Limited

(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003



Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description Malthurst Swallowfield Swallowfield By Pass			
Post town	Reading	Post code	RG7 1LZ
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£41,000	

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick yes

- | | | |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i. as a limited company | <input checked="" type="checkbox"/> | please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> | please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | please complete section (B) |

- d) a charity ☐ please complete section (B)
- e) the proprietor of an educational establishment ☐ please complete section (B)
- f) a health service body ☐ please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or ☒
- I am making the application pursuant to a
 - statutory function or ☐
 - a function discharged by virtue of Her Majesty's prerogative ☐

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
Current postal address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
Current postal address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name Malthurst Limited
Address Registered Office: Vincent House 4 Grove Lane Epping CM16 4LH
Registered number (where applicable) 03445529
Description of applicant (for example, partnership, company, unincorporated association etc.) Company
Telephone number (if any)
E-mail address (optional) N/A

Part 3 Operating Schedule

When do you want the premises licence to start?

Day			Month			Year		
2	5	1	2	2	0	1	4	

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day			Month			Year		

Please give a general description of the premises (please read guidance note1)

A petrol forecourt store situated at Swallowfield By Pass, Reading, RG7 1LZ.

The store will sell a wide range of convenience store goods.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick yes

- | | |
|---|--------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box I)

☒

Supply of alcohol (if ticking yes, fill in box J)

☒

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
Day	Start	Finish			Both <input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			
Thur			
Fri			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Wed			<u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Thur					
Fri					
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
Day	Start	Finish			Both <input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment you will be providing</u>		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) The provision will take place inside the premises but customers may leave the premises with items purchased.		
Mon	0000	0500			
	2300	2400			
Tue	0000	0500			
	2300	2400			
Wed	0000	0500	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
	2300	2400			
Thur	0000	0500			
	2300	2400			
Fri	0000	0500	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 5)		
	2300	2400			
Sat	0000	0500			
	2300	2400			
Sun	0000	0500			
	2300	2400			

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	0000	2400			
Tue	0000	2400			
Wed	0000	2400			
Thur	0000	2400	Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5) The applicant wishes to have the flexibility to sell alcohol at all times that the store is open. The applicant may elect not to open the store 24 hours a day every day.		
Fri	0000	2400			
Sat	0000	2400			
Sun	0000	2400			

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name Ajithkumar Chandrasekaran	
Address 28 Newport Road Reading	
Postcode	RG1 8EA
Personal Licence number (if known) LP7001957	
Issuing licensing authority (if known) Reading Borough Council	

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)

The premises will sell other age restricted products.

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4) The opening hours of the store are not a licensable activity and the applicant asks that the hours not be restricted by the premises licence.
Day	Start	Finish	<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 5)
Mon	0000	2400	
Tue	0000	2400	
Wed	0000	2400	
Thur	0000	2400	
Fri	0000	2400	
Sat	0000	2400	
Sun	0000	2400	

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

b) The prevention of crime and disorder

1. A CCTV system will be installed, or the existing system maintained, such system to be fit for the purpose.
2. The CCTV system shall be capable of producing immediate copies on site. Copies of recordings will either be recorded on good quality video tape or digitally on to CD/DVD or other equivalent medium.
3. Any recording will be retained and stored in a suitable and secure manner for a minimum of 28 days and shall be made available, subject to compliance with Data Protection legislation, to the police for inspection on request.
4. The precise positions of the camera may be agreed, subject to compliance with Data Protection legislation, with the police from time to time.
5. The system will display, on any recording, the correct time and date of the recording.
6. The CCTV system will be maintained and fully operational throughout the hours that the premises are open for any licensable activity.

c) Public safety

The premises licence holder will at all times maintain adequate levels of staff. Such staff levels will be disclosed, on request, to the licensing authority and police.

d) The prevention of public nuisance

Adequate waste receptacles for use by customers shall be provided in and immediately outside the premises.

e) The protection of children from harm

The premises licence holder will ensure that an age verification policy will apply to the premises whereby all cashiers will be trained to ask any customer attempting to purchase alcohol, who appears to be under the age of 25 years (or older if the licence holder so elects) to produce, before being sold alcohol, identification being a passport or photocard driving licence bearing a holographic mark or other form of identification that complies with any mandatory condition that may apply to this licence.

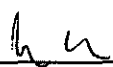
Please tick yes

- I have made or enclosed payment of the fee ☒
- I have enclosed the plan of the premises ☒
- I have sent copies of this application and the plan to responsible authorities and others where applicable ☒
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable ☒
- I understand that I must now advertise my application ☒
- I understand that if I do not comply with the above requirements my application will be rejected ☒

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	25 November 2014
Capacity	Solicitors duly authorised on behalf of the Applicant

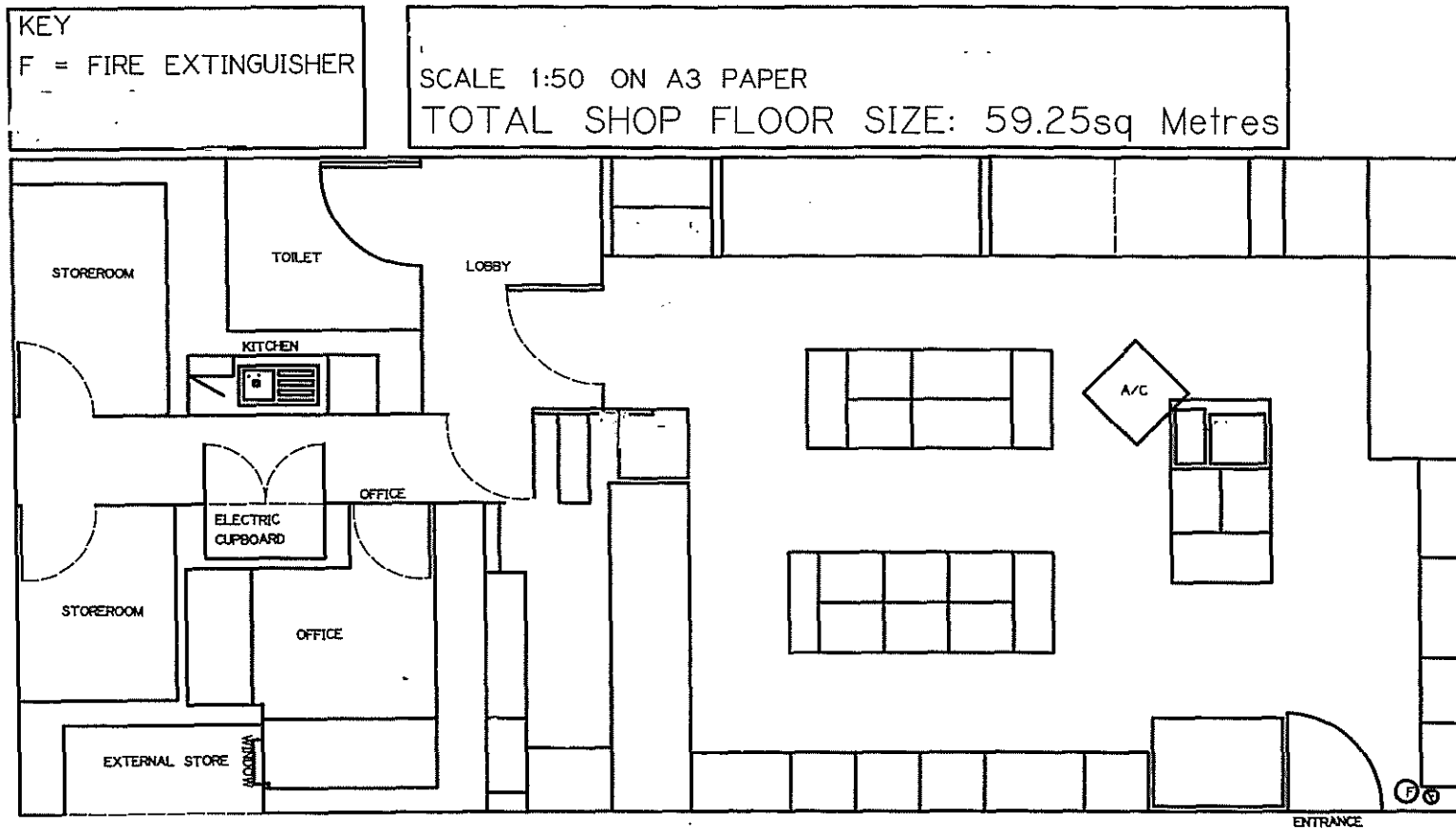
For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13) Winckworth Sherwood LLP (Ref: EMF/28715/95/RPB) Minerva House 5 Montague Close				
Post town	London		Post code	SE1 9BB
Telephone number (if any)		020 7593 5155		
If you would prefer us to correspond with you by e-mail your e-mail address (optional) efinlay@wslaw.co.uk				

Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.



THE ENTIRE PREMISES MAY BE USED FOR THE
SALE OF ALCOHOL AND THE PROVISION OF
LATE NIGHT REFRESHMENT

29/0/2014

APPENDIX TWO

Google



From: Darrell Gale
Sent: 19 December 2014 18:58
To: Karen Court; licensing@thamesvalley.pnn.police.uk; maidenheadfiresafety@rbfrs.co.uk; Environmental Health; Development Control; Trading Standards; Environmental Health; CP Mailbox; Licensing
Cc: Steve.Deane@thamesvalley.pnn.police.uk; Stuart Munro; 'clerk@swallowfieldpc.gov.uk'; Julie Pillai; Clare Lawrence
Subject: RE: MALTHURST SWALLOWFIELD - NOTIFICATION OF APPLICATION FOR NEW PREMISES LICENCE ~[UNCLASSIFIED]~

Comments on above application from Wokingham Borough Council Public Health Department.

I wish to object most strongly to this application for an alcohol license at these service station premises, having visited the premises; its environs and appraised the evidence mentioned below.

The premises are situated in a most isolated position, albeit some several hundred metres west of Spencer's Wood, due to the only access being from the southbound carriageway of the A33 Swallowfield Bypass Road. Therefore the only customers are likely to be drivers or passengers in vehicles driving south on the A33.

The A33 Swallowfield bypass is a 4 lane dual carriageway separated by a grassed central reservation which has very limited and intermittent central reservation barriers in place. There are no formal crossover points aside from the two traffic light controlled junctions to the north of the site; junctions with MereOak Road and with Basingstoke Road. In order to return northbound from the site; one has to drive south on the A33 for 3 miles until one reaches the roundabout junction with the B3349 at Riseley. Alternatively the minor road turning 2 miles south of the site Barge Lane would take one into Swallowfield, from where one could return northwards. I am concerned that customers using the premises for convenience will be tempted to drive across the grass central reservation to perform a u-turn to save the time and mileage involved in continuing southwards to the roundabout and back – a journey of some 6 miles.

Currently the service station provides fuel and convenience goods solely for south-bound drivers. The range of goods sold is unlikely to create a significant pull on residents of surrounding areas. Adding alcohol to the range of goods will I believe create a new market and with 24 hour sales create a sizeable catchment area for alcohol sales at times when other licensed premises have closed, especially those within customers walking journey distance.

The A33 has a poor accident record. There are remnants of roadside tributes at places along the Swallowfield Bypass stretch of the Road. Thames Valley Police reports identify 4 fatal crashes on this stretch of the A33 between Three Mile Cross and Riseley roundabout between 01/01/02 and 31/12/12. Wokingham Borough Council Traffic data identifies 18 non-fatal crashes on this section of the road between 01/11/11 and 31/10/14.

Although the license application is for an off-premises license, this would not stop customers purchasing liquor and drinking this in the car parking forecourts and slip roads adjacent to the service station. Staff would not have control over this. This could increase the likelihood of drivers driving with excess alcohol, a major contributor factor in the likelihood of road vehicle crashes. There is also a danger of young drivers who have not been drinking being influenced and endangered by other passengers in their vehicle who may have consumed alcohol.

Creating a new 24-hour off license within very quick driving distance of Reading and surrounding settlements, which can only be reached by motor vehicle is likely to become an attraction for certain young people, much in the same way that certain fast-food and drive-through restaurants become attractions with an increase in anti-social behaviour usually in evidence. Introducing alcohol into this attraction; and with a fast non-barriered dual carriageway road being the only access risks creating a most dangerous set of circumstances. Evidence is clear that young people driving other young people during the evening and hours of darkness are more likely to lose control of their vehicles than if driving alone.

In summary; the only access to the premises is by a dangerous fast road. 24 hour alcohol sales are likely to create a sizable new market drawn from surrounding areas. The likelihood of traffic collisions and the associated injuries and potential loss of life is I believe too great to award an alcohol licence, especially one for 24 hours to this premises. Therefore the Public Health professional advice would be to refuse this licence application.

With best wishes

Darrell Gale FFPH MSc BA (Hons)
Consultant in Public Health
Wokingham Borough Council
PO Box 154, Shute End, Wokingham RG40 1BN

Tel: 0118 908 8293
Mobile: 07885 989172
Email: Darrell.Gale@wokingham.gov.uk
www.wokingham.gov.uk

From: Karen Court
Sent: 27 November 2014 16:09
To: licensing@thamesvalley.pnn.police.uk; maidenheadfiresafety@rbfrs.co.uk; Environmental Health; Development Control; Trading Standards; Environmental Health; CP Mailbox; Darrell Gale
Cc: Steve.Deane@thamesvalley.pnn.police.uk; Stuart Munro; 'clerk@swallowfieldpc.gov.uk'
Subject: MALTHURST SWALLOWFIELD - NOTIFICATION OF APPLICATION FOR NEW PREMISES LICENCE
~[UNCLASSIFIED]~

LICENSING ACT 2003
NOTIFICATION OF APPLICATION FOR NEW PREMISES LICENCE

PREMISES: MALTHURST SWALLOWFIELD, SWALLOWFIELD BYPASS, READING RG7 1LZ

The Licensing Team received this application on 26 November 2014.

It has been checked and is complete subject to being copied to all responsible authorities in full, as required by the legislation.

Please reply to licensing@wokingham.gov.uk to confirm whether you have received your copy of the application.

You have until the following date to make any representations: **24 December 2014**

If you do not have any comments to make, we would appreciate a "no comments" response from you.

If you have any queries, please let me know.

Regards

Karen Court
Licensing Officer
Licensing Service

West Berkshire and Wokingham Environmental Health & Licensing Service

kcourt@westberks.gov.uk
☎ 01635 519791 📠 (0118) 900 7479