

Gambling Act 2005
Representation Form from Interested Parties
(Please read notes on reverse before completing)

Your details (See notes 2 & 3);

Your Name	Genevieve Hibbs
Your residential address	122 Cromwell Road HAYES UB3 2PT
Your email address	
Your phone number	
The name of the body or organisation you represent	Myself

About the premises;

Name of the premises you are making a representation about	Merkur Slots
Address of the premises you are making a representation about	58 Station Road HAYES UB3 4DF

The Licensing Objectives (See note 4);

Licensing Objective	Reasons for your representation and any supporting evidence
<i>Please tick;</i> <input checked="" type="checkbox"/> Preventing gambling from being a source of crime or disorder, being associated with crime or disorder or being used to support crime	
<input type="checkbox"/> Ensuring that gambling is conducted in a fair and open way	
<input checked="" type="checkbox"/> Protecting children and other vulnerable persons from being harmed or exploited by gambling	With the YMCA hostel nearby and the friends that the residents attract, there is a very vulnerable group of young people nearby.

The outcome you are seeking from the Licensing Authority (See note 6);

Th refuse this application

Signed:Genevieve M Hibbs.. Date: ..27/6/20....

- 1) All representations must be submitted before the conclusion of the 28 day consultation period. This will be advertised on the public notices and also on the Councils website.
- 2) Persons who may make representation include; persons who reside near to the premises to which the application relates and who are likely to be affected by licensable activities; residents associations who are representing residents who reside near to the application premises; Ward Councillors representing their constituents; any person who lives or works in the area and has concerns about the application premises.
- 3) Please note that representations cannot be anonymous. Copies of all representations will be published in any Committee papers and will be sent to all persons involved with the hearing including the applicant. If you have concerns about the use of your information and would like to discuss this further, please contact one of our Licensing Officers for a discussion, on the contact details below.
- 4) In order to be considered 'relevant', the representation must relate to one or more of the 'Licensing Objectives'. These objectives are;
 - a) Preventing gambling from being a source of crime or disorder, being associated with crime or disorder or being used to support crime.
 - b) Ensuring that gambling is conducted in a fair and open way.
 - c) Protecting children and other vulnerable persons from being harmed or exploited by gambling.
- 5) Upon submitting a representation, it is expected that you will attend the Licensing Sub-Committee hearing to deliver your representation verbally and answer any queries that the Committee may have. If you are unable to attend, your written representation will be considered.
- 6) You may wish to suggest an outcome to the Licensing Sub-Committee ie. grant the application with extra conditions; grant the application with fewer hours/activities; reject the application. Please note that the Licensing Sub-Committee will only make reasonable and proportionate decisions based upon the evidence they are presented with, and in line with the laws and regulations governing Licensing Hearings.
- 7) You may continue on separate sheets of paper if necessary and you may also attach any evidence which supports your representation.
- 8) Please submit all completed forms to:
The Licensing Officer
Regulatory Services
London Borough of Hillingdon
Civic Centre
High Street
Uxbridge, UB8 1UW

licensing@hillington.gov.uk

Tel - 01895 277433

www.hillingdon.gov.uk/licensing