

# Report to Licensing Sub-Committee 2

Agenda  
Item:

Meeting Date: 6<sup>th</sup> September 2022  
Portfolio: Finance, Governance and Resources  
Key Decision: No  
Within Policy and Budget Framework YES  
Public / Private Public

Title: No.15 Gin Bar – Objection to applications to Transfer a Premise Licence (PL583) and to Specify a Designated Premises Supervisor

Report of: Corporate Director of Governance and Regulatory Services  
Report Number: GD 48/22

## **Purpose / Summary:**

Cumbria Constabulary have made an objection under the Licensing Act 2003 for the applications received from Rose and Thistle Carlisle Ltd to Transfer the Premises Licence (PL583) and to Vary a Premises Licence to Specify a Designated Premises Supervisor (DPS) for No.15 Gin Bar, Warwick Road, Carlisle. The report details the reasons for the objection and options for Members to consider the application in light of the representation that has been made by Cumbria Constabulary.

## **Recommendation: -**

It is recommended that the Sub-Committee determine the matter and either:

### **For the Transfer of Premises Licence Application**

- (a) Dismiss the objection for the application to Transfer the Premise Licence and grant the application
- (b) Allow the objection to the Transfer of the Premises Licence and reject the application as made.

### **For the application to Specify a Designated Premises Supervisor (DPS)**

- (c) Dismiss the objection for the application to Specify a DPS and grant the application
- (d) Allow the objections and remove Mr Agnew as DPS for PL583.

## 1. Introduction and Applications

- 1.1. No 15 Gin Bar, 15 Warwick Road, Carlisle has a Premises Licence authorising the following licensable activities.

Sale of alcohol	Everyday	9:00am – 1:00am
Recorded Music & Live Music	Everyday	9:00am -1:00am
Late Night Refreshment	Everyday	11:00pm – 1:00am

- 1.2. Applications were received from Rose and Thistle Carlisle Ltd on 2<sup>nd</sup> August 2022 to Transfer the Premises Licence PL583 into their company and also to specify Daniel Agnew as the Designated Premises Supervisor (**Appendix 1 & 2**)
- 1.3. Mr Daniel Agnew and Mr Benjamin Vickery are named as Directors of Rose & Thistle Carlisle Ltd on the company record kept by Companies House.
- 1.4. Where to holder of a premises licence (which authorises the sale of alcohol), has applied to transfer a premises licence and to vary the licence so as to specify the individual named in the application as the Designated Premises Supervisor (DPS); they must also serve a copy of the applications on the Chief of Police for that area.
- 1.5. If the Chief of Police is satisfied that the exceptional circumstances of the case are such that the granting of the application(s) would undermine the crime prevention objective, they must give the relevant licensing authority a notice why they are so satisfied within a period of 14 days beginning with the day on which they are notified of the application(s).

## 2. Notices of Objection

- 2.1. In this case, such a notice for each application has been received by the Licensing Authority from PC Heidi Underwood, Police Licensing Officer on behalf of Cumbria Constabulary. Redated notices are attached at **Appendix 3 & 4**. Due to the sensitive personal information contained in the notices, full versions will be considered within Part B of the hearing under report GD 49/22.
- 2.2. PC Underwood provides information within the notices of the reasons why it is thought that granting the applications would seriously undermine the crime prevention objective. This includes details of the management of a licensed premises, Mamoa, Carlyle Court, Carlisle. The applicants held the premises

licence and Mr Agnew was DPS. PC Underwood gives details of disorder, breach of conditions, Covid breaches and lack of assistance with Cumbria Police in the investigation into the murder outside of the premises in September 2021.

### **3. Legal Position**

### **4. Reason for Decision/Recommendation**

- 4.1. The Licensing Authority has received objection notices from Cumbria Constabulary in relation to applications to transfer the premises licence PL583 and specify a DPS for the premises. They have stated granting the applications would seriously undermine the crime prevention objective.
- 4.2. The application will be determined in accordance with the relevant sections of the Act, the statement of licensing policy and guidance offered by the secretary of state

### **5. Recommendation**

It is recommended that the Sub-Committee determine the matter and either:

#### **For the Transfer of Premises Licence Application**

- a. Dismiss the objection for the application to Transfer the Premise Licence and grant the application
- b. Allow the objection to the Transfer of the Premises Licence and reject the application as made.

#### **For the application to Specify a Designated Premises Supervisor (DPS)**

- c. Dismiss the objection for the application to Specify a DPS and grant the application
- d. Allow the objections and remove Mr Agnew as DPS for PL583.

**Contact Officer: Nicola Edwards**

**Ext: 7025**

#### **Appendices**

**attached to report:**

1. Application to Transfer a Premise Licence (PL583)
2. Application to Specify a DPS (PL583)

3. Notice of objection for application to Transfer Premises Licence (PL583) (Redacted)
4. Notice of objection for application to Specify a DPS (PL582) (Redacted)

**Note: in compliance with section 100d of the Local Government (Access to Information) Act 1985 the report has been prepared in part from the following papers:**

**CORPORATE IMPLICATIONS:**

**LEGAL –**

**FINANCE –**

**EQUALITY –**

**INFORMATION GOVERNANCE –**

CA09

Carlisle City Council  
Licensing Manager, Civic Centre, Carlisle CA3 8QG  
Tel: 01228 817523 Fax: 01228 817023  
Email: licensing@carlisle.gov.uk



Application to vary a premises licence to specify an individual as designated premises supervisor 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.

Rose and Thistle Carlisle Ltd.

I/we ~~DARTEL G P P AGNEW~~ ~~BEN MICHAEL VICKERY~~  
(full name(s) of premises licence holder)

being the premises licence holder, apply to vary a premises licence to specify the individual named in this application as the premises supervisor under section 37 of the Licensing Act 2003

Premises licence number

PL 583

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description

NO. 15 GINBAR  
15 WARWICK ROAD

Post town

CARLISLE

Post code (if known)

CA1 1DH

Telephone number (if any)

Description of premises (please read guidance note 1)

GINBAR

REVENUES &  
BENEFITS SERVICE  
28 JUL 2022  
RECEIVED

**Part 2**

**Full name of proposed designated premises supervisor**  
DANIEL.G.D.P AGNEW

**Nationality**

**Place of birth**

**Date of birth**

**Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)**

**Full name of existing designated premises supervisor (if any)**

**Please tick yes**

I would like this application to have immediate effect under section 38 of the Licensing Act 2003

I have enclosed the premises licence or relevant part of it

(If you have not enclosed the premises licence, or relevant part of it, please give reasons why not)

**Reasons why I have failed to enclose the premises licence or relevant part of it**  
THE LICENCE IS IN THE PREMISES UNTIL IT IS TRASFERED OVER TO US.

**Please tick yes**

- I have made or enclosed payment of the fee
- I will give a copy of this application to the chief officer of police
- I have enclosed the consent form completed by the proposed premises supervisor
- I have enclosed the premises licence, or relevant part of it or explanation
- I will give a copy of this form to the existing premises supervisor, if any
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971] FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

**Part 3 – Signatures** (please read guidance note 2)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (See guidance note 3). **If signing on behalf of the applicant please state in what capacity.**

Signature

.....

Date

1/8/22

Capacity

Director

**For joint applicants signature of 2<sup>nd</sup> applicant 2<sup>nd</sup> applicant's solicitor or other authorised agent** (please read guidance note 4). **If signing on behalf of the applicant please state in what capacity.**

Signature

.....

Date

1/8/22

Capacity

Director

**Contact name (where not previously given) and postal address for correspondence associated with this application** (please read guidance note 5)

Post town

Carlisle

Post Code

**Telephone number (if any)**

**If you would prefer us to correspond with you by e-mail your e-mail address (optional)**



## Guidance notes

1. Describe the premises. For example the type of premises it is.
2. The application form must be signed.
3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
5. This is the address which we shall use to correspond with you about this application.

CA16

Carlisle City Council  
Licensing Manager, Civic Centre, Carlisle CA3 8QG  
Tel: 01228 817523 Fax: 01228 817023  
Email: [licensing@carlisle.gov.uk](mailto:licensing@carlisle.gov.uk)



**Consent of individual to being specified as premises supervisor**

DANIEL G D P AGNEW

I  
[full name of prospective premises supervisor]

of

\_\_\_\_\_

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

PREMISES LICENCE  
[type of application]

by  
Rose and Thistle Carlisle Ltd

X ~~DANIEL G D P AGNEW~~  
[name of applicant]

relating to a premises licence \_\_\_\_\_  
[number of existing licence, if any]

for

NO. 15 GIN BAR  
15 WARWICK ROAD  
CARLISLE  
CA1 1DH

\_\_\_\_\_

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by Rose and Thistle Centre Ltd

~~DANIEL G.D.P AGNEW~~  
[name of applicant]

concerning the supply of alcohol at

NO. 15 GIN BAR  
15 WARWICK ROAD  
CARLISLE  
CA1 1DH

\_\_\_\_\_  
[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

PA1953  
[insert personal licence number, if any]

Personal licence issuing authority

CARLISLE CITY COUNCIL  
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed \_\_\_\_\_

Name (please print)

DANIEL G.D.P AGNEW

Date

26/7/22

CA10

Carlisle City Council  
Licensing Manager, Civic Centre, Carlisle CA3 8QG  
Tel: 01228 817523 Fax: 01228 817023  
Email: licensing@carlisle.gov.uk



Application to transfer 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 ~~DANIEL G D PAGNEW BEN MICHAEL VICKERY~~  
~~DANIEL G D PAGNEW BEN MICHAEL VICKERY~~  
(Insert name of applicant) ROK and THISTLE CARLISLE LTD.

apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

PL 583

**Part 1 – Premises details**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b> NO. 15 GIN BAR 15 WARWICK ROAD CARLISLE CA11DH	
<b>Post town</b> CARLISLE	<b>Post code</b> CA11DH
<b>Telephone number at premises (if any)</b>	

**Please give a brief description of the premises (see note 1)**  
GIN BAR

**Name of current premises licence holder**  
JAMES GALLAGHER.

**Part 2 - Applicant details**

In what capacity are you applying for the premises licence to be transferred to you?

- Please tick  yes
- a) an individual or individuals\*  please complete section (A)
  - b) a person other than an individual \*
    - i. as a limited company  please complete section (B)
    - ii. as a partnership  please complete section (B)

- iii. as an unincorporated association or  please complete section (B)
- iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  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) an individual 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 respect of 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  Mrs  Miss  Ms  Other title   
(for example, Rev)

**Surname**

**First names**

**Date of birth**

**I am 18 years old or over**

Please tick  yes

**Nationality**

Where applicable (if demonstrating a right to work via the Home Office online right to work checking services), the 9-digit 'share code' provided to the applicant by that service (please see note 2 for information).

**Current residential address if different from premises address**

**Post town**

**Post code**

**Daytime contact telephone number**

**E-mail address (optional)**

**SECOND INDIVIDUAL APPLICANT (fill in as applicable)**

Mr

Mrs

Miss

Ms

Other title

(for example, Rev)

**Surname**

**First names**

**Date of birth**

**I am 18 years old or over**

Please tick  yes

**Nationality**

Where applicable (if demonstrating a right to work via the Home Office online right to work checking services), the 9-digit 'share code' provided to the applicant by that service (please see note 2 for information).

**Current residential address if different from premises address**

**Post town**

**Post code**

**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	Rose and Thistle Centre Ltd. <del>BEN MICHAEL VICKERY DANIEL G D P AGNEW</del>	K
Address		
Registered number (where applicable)	121 77580	X
Description of applicant (for example partnership, company, unincorporated association etc.)	ltd COMPANY	X
Telephone number (if any)		
E-mail address (optional)	Rose and Thistle Centre Ltd.	

### Part 3

Please tick  yes

Are you the holder of the premises licence under an interim authority notice?

Do you wish the transfer to have immediate effect?

If not when would you like the transfer to take effect?

Day Month Year  
01 08 2022

Please tick  yes

I have enclosed the consent form signed by the existing premises licence holder

If you have not enclosed the consent form referred to above please give the reasons why not. What steps have you taken to try and obtain the consent?

Please tick  yes

If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003)

Please tick  yes

I have enclosed the premises licence

If you have not enclosed premises licence referred to above please give the reasons why not.

*The licence is in the premises until it is transferred over to us.*

- I have made or enclosed payment of the fee
- I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed
- I have enclosed the premises licence or relevant part of it or explanation
- I have sent a copy of this application to the chief officer of police today
- I have sent a copy of this form to Home Office Immigration Enforcement today
- Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents, or my Home Office online right to work checking service share code, to demonstrate my entitlement to work in the United Kingdom (please read note 2)

**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE**



**WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971] FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.**

I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 2)

**Part 4 – Signatures** (please read guidance note 3)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (See guidance note 4). **If signing on behalf of the applicant please state in what capacity.**

Signature

.....

Date

1/8/22

Capacity

Director

**For joint applicants signature of second applicant, second applicant’s solicitor or other authorised agent** (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.**

Signature

.....

Date

1/8/22

Capacity

Director

**Contact name (where not previously given) and postal address for correspondence associated with this application** (please read guidance note 6)

Post town

Cardu

Post Code

CA03

Carlisle City Council

Licensing Manager, Civic Centre, Carlisle CA3 8QG

Tel: 01228 817523 Fax: 01228 817023

Email: [licensing@carlisle.gov.uk](mailto:licensing@carlisle.gov.uk)



[www.carlisle.gov.uk](http://www.carlisle.gov.uk)

Consent of premises licence holder to transfer

~~Insert~~  
full

JAMES GALLAGHER

name(s) of premises licence holder(s)]

the premises licence holder of premises licence number

[Insert premises licence number]

relating to premises:

NO. 15 GIN BAR  
15 WARWICK ROAD  
CARLISLE  
CA1 1DH

[insert name and address of premises to which the application relates]

hereby give my consent for the transfer of premises licence number

[Insert premises licence number]

to

Rose and Thistle Carlisle LTD

[full name and address of transferee]

Signed:

Print name:

James Gallagher

Dated:

1-8-22

**Making an Objection against an Application to Transfer a Premises Licence 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 PC 1479 Heidi UNDERWOOD**

*(Insert name of applicant)*

**Make this representation under Section 42(6) of the Licensing Act 2003 for the premise  
described in Part 1 below**

**Part 1 – Premises or club premises details**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b> No15 Gin Bar, 15 Warwick Road	
<b>Post town</b> Carlisle	<b>Post code (if known)</b> CA1 1DH

<b>Name of premises licence holder or club holding club premises certificate (if known)</b>
---

<b>Number of premises licence or club premises certificate (if known)</b>
---

**Part 2 - Applicant details**

I am

Please tick ✓ yes

1) an individual, body or business which is not a responsible  
authority (please read guidance note 1, and complete (A)  
or (B) below)

2) a responsible authority (please complete (C) below)

3) a member of the club to which this application relates  
(please complete (A) below)

**(A) DETAILS OF INDIVIDUAL APPLICANT** (fill in as applicable)

Please tick ✓ yes

Mr

Mrs

Miss

Ms

Other title  
(for example, Rev)

**Surname**

**First names**

**I am 18 years old or over**

Please tick ✓ yes

**Current postal  
address if  
different from  
premises  
address**

**Post town**

**Post Code**

**Daytime contact telephone number**

**E-mail address  
(optional)**

**(B) DETAILS OF OTHER APPLICANT**

Name and address

Telephone number (if any)

E-mail address (optional)

**(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT**

Name and address Cumbria Constabulary Carlisle Police Station Durranhill Industrial Estate Brunel Way Carlisle CA1 3NQ
Telephone number (if any) <b>101</b>
E-mail address (optional)

**This application to review relates to the following licensing objective(s)**

- Please tick one or more boxes ✓
- 1) the prevention of crime and disorder
  - 2) public safety
  - 3) the prevention of public nuisance
  - 4) the protection of children from harm

**Please state the ground(s) for review (please read guidance note 2)**

Police consider that there are exceptional circumstances regarding this application and consider that granting the application would seriously undermine the crime prevention objective.

We are objecting to both the transfer of the license and the specified DPS.

In 2020 Rose and Thistle Carlisle Ltd held the license for Mamoa Bar with the DPS being Daniel AGNEW.

Since opening in 2020 Mamoa came to the attention of the police in relation to issues with the management of the premises and breaches of covid regulations.

On the first night of opening in July 2020 we received a report of 20 people fighting within the premises, two off duty officers who were in a neighbouring premises had to come and assist which resulted in a male being arrested for D&D. (CP-20200704-0196)

On the 08/08/20 police received a report of mass fighting 30+ people. (CP-20200808-0312)

On the 14/08/20 police received a report of around 30 people smashing glasses and causing an issue, there were only 2 staff members on at the time. (CP-20200814-0312)

In August 2020 a licensing visit was carried out and concerns were raised, all of which were put in writing to Mr AGNEW however the issues continued. One of the issues raised was the lack of door staff.

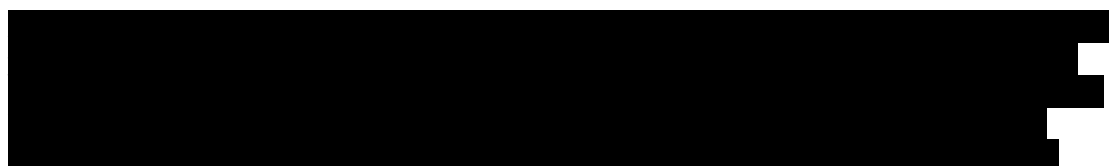
During the Covid pandemic they continually breached covid guidelines and were issued with a fixed penalty ticket.

On 13/05/21 Police received a report of 3 males fighting one of the males being the manager and another a member of staff at the premises. When officers attended no one would speak to the police and when they requested to see the CCTV footage, the owner stated the CCTV was not working at the time and then a follow up by agencies suggested the CCTV had been wiped. (CP-20210513-0231) clearly a breach of their licence conditions.

On the 18/09/21 there was a murder in the courtyard directly outside Mamoa involving people that had been in the premises. Following the incident, the manager failed to cooperate with the police making it very difficult for the police to get the CCTV. In the seizing officers statement, it states that he went in, unplugged it and seized it as this was the only way they could get the CCTV due to how difficult Daniel AGNEW was being at the time, as he continued to make himself unavailable to police when requested. (CP-20210918-0248)

In December 2021 a meeting was held with Mr AGNEW to raise concerns about the premises and he was asked to submit a minor variation to amend their licence conditions to include a requirement for door staff, along with several other conditions which would help prevent crime and disorder but this did not happen.

In April 2021 the lease between the owners of Carlyle Court forfeited the lease with Rose and Thistle Carlisle Ltd and the property was secured. It is understood that this was following breaches of the lease and disputes with neighbouring businesses.



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Both Sergeant BLACK and PC UNDERWOOD will attend any hearing to provide evidence / clarify questions etc.

Police have serious misgivings as to whether this company / applicant should be granted transfer onto this licence and request the applicant be rejected and request that Mr AGNEW is removed as the Designated Premises Supervisor.

**Please provide as much information as possible to support the application** (please read guidance note 3)



**Please tick ✓ yes**

Have you made an application for review relating to the premises before

If yes please state the date of that application

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

**If you have made representations before relating to the premises please state what they were and when you made them**

Please tick ✓

yes

- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate
- I understand that if I do not comply with the above requirements my application will be rejected

**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**Part 3 – Signatures** (please read guidance note 4)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.**

Signature                      Police Sergeant Peter Aiston (Signed on behalf of PC Heidi Underwood)

.....

Date                      09/08/2022

.....

Capacity              Police licensing officer

.....

<b>Contact name (where not previously given) and postal address for correspondence associated with this application</b> (please read guidance note 6)	
<b>Post town</b>	<b>Post Code</b>
<b>Telephone number (if any)</b>	
<b>If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)</b>	

## **Notes for Guidance**

1. A responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
2. The ground(s) for review must be based on one of the licensing objectives.
3. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
4. The application form must be signed.
5. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
6. This is the address which we shall use to correspond with you about this application.

**Making an Objection against an Application to Specify a DPS 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 PC1479 Heidi UNDERWOOD**

*(Insert name of applicant)*

**Make this representation under Section 42(6) of the Licensing Act 2003 for the premise described in Part 1 below**

**Part 1 – Premises or club premises details**

**Postal address of premises or, if none, ordnance survey map reference or description**

No15 Gin Bar,  
15 Warwick Road

**Post town** Carlisle

**Post code (if known)** CA1 1DH

**Name of premises licence holder or club holding club premises certificate (if known)**

**Number of premises licence or club premises certificate (if known)**

**Part 2 - Applicant details**

I am

Please tick ✓ yes

1) an individual, body or business which is not a responsible authority (please read guidance note 1, and complete (A) or (B) below)

2) a responsible authority (please complete (C) below)

3) a member of the club to which this application relates  
(please complete (A) below)

**(A) DETAILS OF INDIVIDUAL APPLICANT** (fill in as applicable)

Please tick ✓ yes

Mr  Mrs  Miss  Ms  Other title  
(for example, Rev)

**Surname**

**First names**

**I am 18 years old or over**

Please tick ✓ yes

**Current postal  
address if  
different from  
premises  
address**

**Post town**

**Post Code**

**Daytime contact telephone number**

**E-mail address  
(optional)**

**(B) DETAILS OF OTHER APPLICANT**

Name and address

Telephone number (if any)

E-mail address (optional)

**(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT**

Name and address Cumbria Constabulary Carlisle Police Station Durrhill Industrial Estate Brunel Way Carlisle CA1 3NQ
Telephone number (if any) <b>101</b>
E-mail address (optional)

**This application to review relates to the following licensing objective(s)**

- Please tick one or more boxes ✓
- 1) the prevention of crime and disorder
  - 2) public safety
  - 3) the prevention of public nuisance
  - 4) the protection of children from harm

**Please state the ground(s) for review (please read guidance note 2)**

Police consider that there are exceptional circumstances regarding this application and consider that granting the application would seriously undermine the crime prevention objective.

We are objecting to both the transfer of the license and the specified DPS.

In 2020 Rose and Thistle Carlisle Ltd held the license for Mamoa Bar with the DPS being Daniel AGNEW.

Since opening in 2020 Mamoa came to the attention of the police in relation to issues with the management of the premises and breaches of covid regulations.

On the first night of opening in July 2020 we received a report of 20 people fighting within the premises, two off duty officers who were in a neighbouring premises had to come and assist which resulted in a male being arrested for D&D. (CP-20200704-0196)

On the 08/08/20 police received a report of mass fighting 30+ people. (CP-20200808-0312)

On the 14/08/20 police received a report of around 30 people smashing glasses and causing an issue, there were only 2 staff members on at the time. (CP-20200814-0312)

In August 2020 a licensing visit was carried out and concerns were raised, all of which were put in writing to Mr AGNEW however the issues continued. One of the issues raised was the lack of door staff.

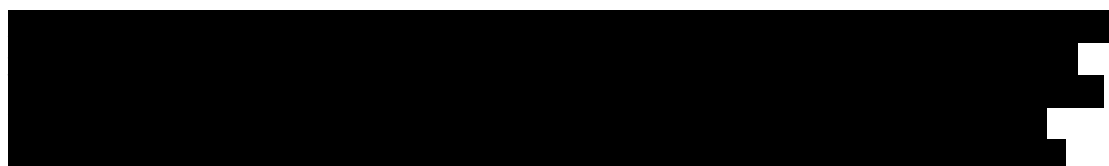
During the Covid pandemic they continually breached covid guidelines and were issued with a fixed penalty ticket.

On 13/05/21 Police received a report of 3 males fighting one of the males being the manager and another a member of staff at the premises. When officers attended no one would speak to the police and when they requested to see the CCTV footage, the owner stated the CCTV was not working at the time and then a follow up by agencies suggested the CCTV had been wiped. (CP-20210513-0231) clearly a breach of their licence conditions.

On the 18/09/21 there was a murder in the courtyard directly outside Mamoa involving people that had been in the premises. Following the incident, the manager failed to cooperate with the police making it very difficult for the police to get the CCTV. In the seizing officers statement, it states that he went in, unplugged it and seized it as this was the only way they could get the CCTV due to how difficult Daniel AGNEW was being at the time, as he continued to make himself unavailable to police when requested. (CP-20210918-0248)

In December 2021 a meeting was held with Mr AGNEW to raise concerns about the premises and he was asked to submit a minor variation to amend their licence conditions to include a requirement for door staff, along with several other conditions which would help prevent crime and disorder but this did not happen.

In April 2021 the lease between the owners of Carlyle Court forfeited the lease with Rose and Thistle Carlisle Ltd and the property was secured. It is understood that this was following breaches of the lease and disputes with neighbouring businesses.



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Both Sergeant BLACK and PC UNDERWOOD will attend any hearing to provide evidence / clarify questions etc.

Police have serious misgivings as to whether this company / applicant should be granted transfer onto this licence and request the applicant be rejected and request that Mr AGNEW is removed as the Designated Premises Supervisor.



**Please provide as much information as possible to support the application** (please read guidance note 3)

**Please tick ✓ yes**

Have you made an application for review relating to the premises before

If yes please state the date of that application

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

**If you have made representations before relating to the premises please state what they were and when you made them**

Please tick ✓

yes

- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate
- I understand that if I do not comply with the above requirements my application will be rejected

**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**Part 3 – Signatures** (please read guidance note 4)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.**

Signature                      Police Sergeant Peter Aiston (signed on behalf of PC Heidi Underwood)

.....

Date              **09/08/22**

.....

Capacity      **Police Licensing Officer**

.....

<b>Contact name (where not previously given) and postal address for correspondence associated with this application</b> (please read guidance note 6)	
<b>Post town</b>	<b>Post Code</b>
<b>Telephone number (if any)</b>	
<b>If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)</b>	

## **Notes for Guidance**

1. A responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
2. The ground(s) for review must be based on one of the licensing objectives.
3. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
4. The application form must be signed.
5. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
6. This is the address which we shall use to correspond with you about this application.