

AGENDA ITEM NO.

TRAFFORD COUNCIL

THE LICENSING SUB-COMMITTEE – 27th FEBRUARY 2016

REPORT OF THE HEAD OF PUBLIC PROTECTION

REPORT REF. NO.

**APPLICATION FOR THE GRANT OF A NEW PREMISES LICENCE (PL059021) –
CORFU TAVERNA, 23 THE DOWNS, ALTRINCHAM, CHESHIRE, WA14 2QD**

PURPOSE

To advise Members of an application for the Grant of a new premises licence (PL059021) for Corfu Taverna at 23 The Downs, Altrincham, Cheshire, WA14 2QD.

The application has attracted representations from a local resident and from Trafford Council Regulatory Services Pollution & Housing Team who recommend the attachment of conditions to the licence and which have been agreed by the applicant.

OPTIONS

The Sub-Committee to take such steps as they consider necessary for the promotion of the Licensing Objectives in accordance with the provisions of subsection (4) of the Licensing Act 2003.

Iain Veitch
Head of Public Protection

Further Information From:

Name: Jan Taylor
Licensing Officer
Extension: 4047

Proper Officer for the purposes of L.G.A 1972,S.100D
(background papers): Head of Public Protection

Appendices:

Appendix A – Application and Operating Schedule (including layout of premises)

Appendix B – Representation from Trafford Council Regulatory Services Pollution & Housing Team

Appendix C - Agreement from the applicant to the inclusion of conditions and confirmation that a full hearing is not necessary.

Appendix D - Representation against the application from a local resident.

1. Background

- 1.1 23 The Downs was formerly licensed as a restaurant premises with a licence for the sale of alcohol on the premises Monday to Saturday for a terminal hour of 00:00 hours (midnight).
- 1.2 The premises licence at 23 The Downs was surrendered in October 2014 and the property has been vacant since that time.
- 1.3 Currently in the area, there are several licensed premises operating. These are:

24 The Downs Monday & Tuesday : 11:00 to 23:00
 Wednesday : 11:00 to 00:30
 Thursday : 11:00 to 01:30
 Friday & Saturday : 11:00 to 02:00

New Dilli Monday : 19:00 to 00:00
 Tuesday to Thursday : 19:00 to 00:00
 Friday & Saturday : 12:00 to 01:00

Gonbay Monday to Saturday: 11:00 to 00:00
 Sunday : 11:00 to 23:00

2. Application for the Grant of a Premises Licence

- 2.1 On 25th November, 2015, the Licensing Section received an application (**Appendix A**) from Spianada Limited for the grant of a new premises licence.
- 2.2 The application requests the granting of a premises licence to provide Supply of Alcohol, on the premises only. Regulated Entertainment for Recorded Music and Late Night Refreshment (indoors).
- 2.3 The hours requested for the licensable activities on the original application are as follows:

Sale of Alcohol (on premises):

Monday to Sunday : 17:00 – 00:00

Provision of Regulated Entertainment (indoors):

Recorded Music

Monday to Sunday : 17:00 – 00:00

Late Night Refreshment (indoors):

Monday to Sunday : 23:00 – 00:00

2.4 The applicant has complied with all requirements under the application process including advertising the application in a newspaper, advertising by way of public notice at the premises and submitting a copy of the complete application to all Responsible Authorities. The application is deemed to be correctly submitted.

3. Representations

3.1 During the consultation period, a representation was received from the Council's Pollution & Housing Team (**Appendix B**).

3.2 The recommended conditions have been agreed by the applicant and will form part of the proposed conditions to be attached to the premises licence (**Appendix C**).

3.3 A Representation has been received against the application from a local resident and is attached as **Appendix D**.

3.4 The Committee are respectfully advised that the representation received against the application broadly relates to the Licensing Objective:

- Prevention of Public Nuisance

3.3 It is recommended that, in borderline cases, the benefit of the doubt about any aspect of a representation should be given to the person making that representation. The subsequent hearing would then provide an opportunity for the person or body making the representation to amplify and clarify it.

3.4 The Members will be required to determine the relevance of the representations.

3.5 When considering the relevance of the representation the Licensing Sub-Committee must apply three rules:

- i. the representation must be from persons who live, or are involved in a business in the area and are likely to be affected by the application;
- ii. it must not be repetitious, vexatious or frivolous;
- iii. it must relate to one or more of the licensing objectives.

4. Licensing Policy and Guidance

4.1 The Committee are respectfully referred to the Council's own Licensing Policy relating to the Licensing Act 2003 objectives and to the Secretary of State's Guidance. (Copy available at meeting)

5. Options

5.1 The Sub-Committee to take such steps as they consider necessary for the promotion of the Licensing Objectives in accordance with the provisions of subsection (4) of the Licensing Act 2003. The steps specified are:

5.1.1 To grant the licence subject to-

- Conditions consistent with the operating schedule accompanying the application modified to such extent as the authority considers necessary for the promotion of the licensing objectives, and;
- Any mandatory conditions which must be included under the Licensing Act 2003

5.1.2 to exclude from the scope of the licence any of the licensable activities to which the application relates;

5.1.3 to refuse to specify a person in the licence as the premises supervisor;

5.1.4 to reject the application.

5.2 The Sub-Committee is advised that any findings on any issues of fact should be on the balance of probability and any decision should be based on the individual merits of the application.

5.3 The Sub-Committee, in arriving at its decision, must have regard to relevant provisions of national guidance and its own statement of licensing policy and reasons should be given for any departure.

APPENDIX A

APPLICATION AND OPERATING SCHEDULE (including premises layout)



**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 **SPIANADA 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			
Corfu Taverna 23 The Downs Altrincham Cheshire WA14 2QD			
Post town	Altrincham	Post code	WA14 2QD

Telephone number at premises (if any)	0161 929 4043
Non-domestic rateable value of premises	£8,500.00

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as
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) 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 Spianada Limited
Address 1 Crossdale Road Blackley <i>M9 6JU</i>
Registered number (where applicable) 9808896
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) 07517 374051
E-mail address (optional) spyroscfu@gmail.com

Part 3 Operating Schedule

When do you want the premises licence to start?

Day		Month		Year	
↓	↓	↓	↓	↓	↓

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)

Small restaurant with small waiting area covering 40 sittings. Bar Area is available for people to drink alcohol.

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

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"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
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)			Will the exhibition of films 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	Please give further details here (please read guidance note 3)					
Mon								
Tue								
Wed						State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur								
Fri						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 (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			<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)
Fri			
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	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri					
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	17:00	00:00	<u>Please give further details here</u> (please read guidance note 3)		
Tue	17:00	00:00			
Wed	17:00	00:00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Thur	17:00	00:00			
Fri	17:00	00:00	<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)		
Sat	17:00	00:00			
Sun	17:00	00:00			

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur					
Fri			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 (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 checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	23:00	00:00	<u>Please give further details here</u> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue	23:00	00:00			
Wed	23:00	00:00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur	23:00	00:00			
Fri	23:00	00:00	<u>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</u> (please read guidance note 5)		
Sat	23:00	00:00			
Sun	23:00	00:00			

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 checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	17:00	00:00			
Tue	17:00	00:00			
Wed	17:00	00:00			
Thur	17:00	00:00			
Fri	17:00	00:00			
Sat	17:00	00:00			
Sun	17:00	00:00			
			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)		

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

Name Spyridon-Dimitrios Papoutsis	
Address 1 Crossdale Road Blackley Manchester	
Postcode	M9 6JU
Personal Licence number (if known)	
Issuing licensing authority (if known)	

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)

L

<p>Hours premises are open to the public Standard days and timings (please read guidance note 6)</p>			<p><u>State any seasonal variations</u> (please read guidance note 4)</p>
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

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)

ANY PERSON ~~THAT~~ WHO APPEARS TO BE DRUNK OR AGGRESSIVE WILL NOT BE PERMITTED ON PREMISES
NO DRINK PROMOTION WILL TAKE PLACE
A SUITABLE EVACUATION PLAN IN CASE OF EMERGENCY
FREE DRINKING WATER WILL BE AVAILABLE ALL THE TIMES

b) The prevention of crime and disorder

NO DRINK PROMOTIONS WILL TAKE PLACE
ANY PERSON WHO APPEARS DRUNK/AGGRESSIVE WILL NOT BE PERMITTED ON THE PREMISES
NO BOTTLES OR GLASSES WILL BE TAKEN OF THE PREMISES
REGISTRATION WITH CRIME PREVENTATION INITIATIVES RUN BY THE POLICE

c) Public safety

STAFF WILL BE FULLY AWARE OF LICENSING LAWS
I WILL FULLY SUPPORT ANY DIRECTIVES RECEIVED FROM THE AUTHORITIES
PROMPT CLEARING OF EMPTY GLASSES THROUGHOUT OPERATING TIMES
REGULAR ELECTRIC AND GAS CHECKS

d) The prevention of public nuisance

DOORS AND WINDOWS SHOULD BE KEPT CLOSED
NOTICES TO BE PLACED IN PROMINENT POSITIONS TO ASK PATRONS TO LEAVE THE PREMISES QUIETLY
NO BOTTLES OR GLASSES TO TAKEN OF THE PREMISES

e) The protection of children from harm

PROOF OF AGE WILL BE ASKED IF SOMEONE APPEARS UNDER AGE
NO BOTTLES OR GLASSES TO TAKEN OF THE PREMISES
TRAINING STAFF TO ENSURE COMPLIANCE WITH THE LAW IN RELATION TO CONSUMPTION OF ALCOHOL BY PERSON 18 YEARS OF AGE

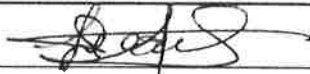
Please tick yes

- 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	10-11-2015
Capacity	

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)

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

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.



Consent of individual to being specified as premises supervisor

I SPYRIDON DIMITRIOS PAPOUTSIS

(full name of prospective premises supervisor)

of SPIANADA LIMITED

1 CROSSDALE ROAD BLACKLEY MANCHESTER

(home address of prospective premises supervisor)

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

PREMISES LICENCES

(type of application)

by

SPIANADA LIMITED

(name of applicant)

relating to a premises licence.....

(number of existing licence, if any)

for

23 THE DOWNS ALTRINGHAM WA14 2QD

(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

SPIANADA LIMITED

(name of applicant)

concerning the supply of alcohol at

CORFU TAVERNA
23 THE DOWNS
ALTRINGHAM
WAL4 2GD

(name and address of premises to which the application relates)

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence Number

137578

(insert personal licence number, if any)

Personal licence issuing authority

MANCHESTER CITY COUNCIL

(insert name and address and telephone number of personal licence issuing authority, if any)



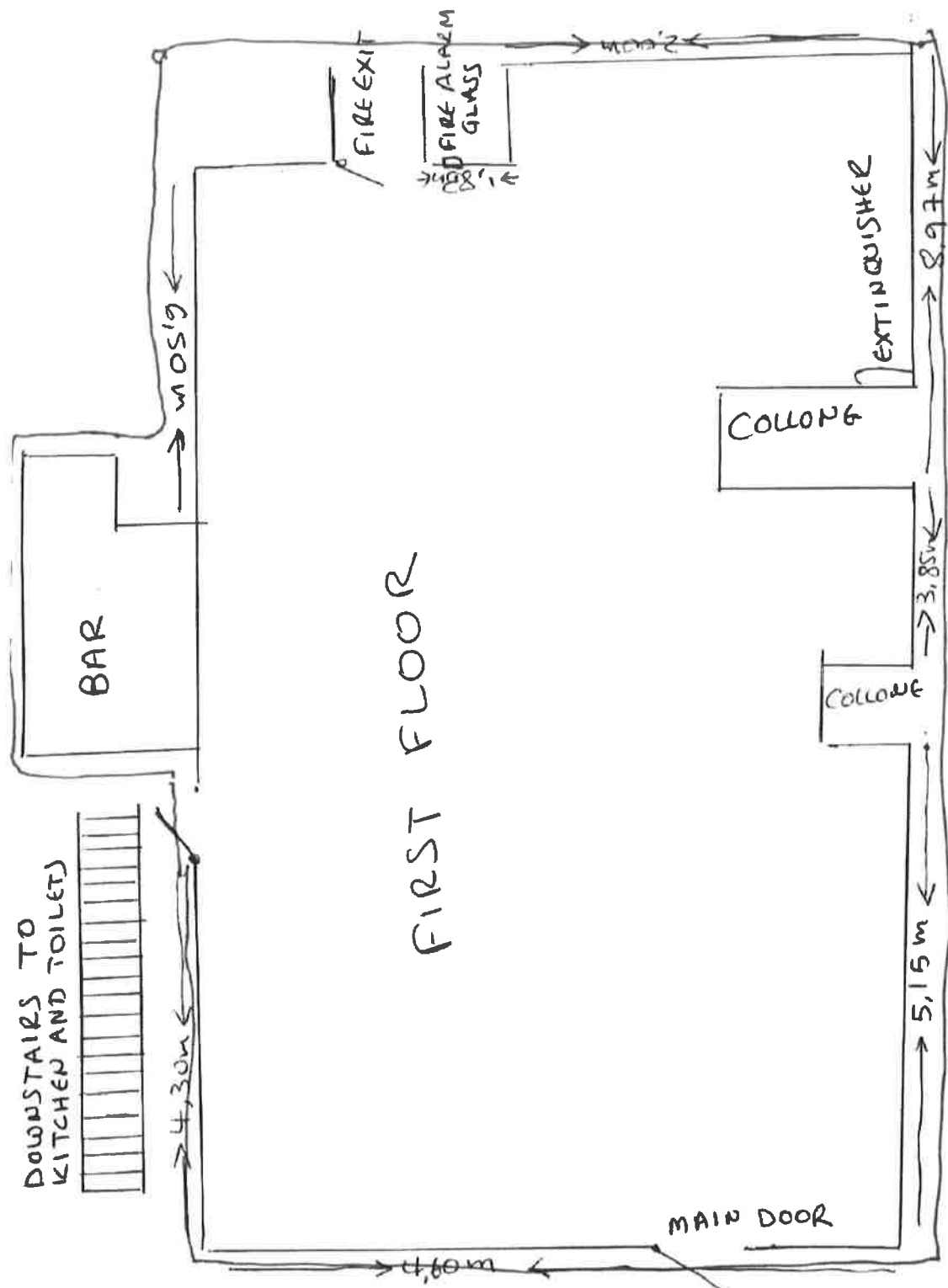
Signed

SPYRIDON-DIMITRIOS PAPOUTSIS

Name

16-11-2015

Date



CORFU TAVERNA
 23 THE DOWNS
 ALTRINCHAM WA14 2QD

APPENDIX B

Representation from Trafford Council Regulatory Services Pollution and Housing Team

BOROUGH OF TRAFFORD**MEMORANDUM****From:** Pollution**To:** Licensing Manager**FAO:****Ref:** NFA/138850**Ref:****Tel** 0161 912 4026**Date:** 23 December 2015**Ext:**

**If telephoning please ask Miss N Ali
for:**

Subject: Corfu Taverna, 23 The Downs, Altrincham

Following a visit to the above premises on the 21st December 2015 the following conditions were discussed with and agreed by the applicant. It is therefore recommended that the following conditions are attached to the license:

PPN3

"Noise from music and associated sources (including DJ's and amplified voices) must not be audible to such an extent that it constitutes a nuisance at any noise sensitive properties".

PPN4

All external doors and windows shall be kept closed when regulated entertainment is being provided except in the event of an emergency.

PPN6

There shall be placed at all exits from the premises in a place where they can be seen and easily read by the public, (or member and their guests) notices requiring customers to leave the premises and the area quietly. (Note, this may also include a reference to vehicles).

N. Ali

**N.Ali
Environmental Health Officer**

APPENDIX C

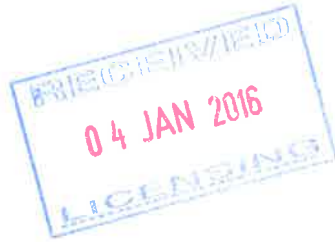
**All Party Agreement signed by Applicant
(including confirmation that no hearing is necessary)**

Please insert your full correspondence address below:

Spianada Limited
1 Crossdale Road
Higher Blackley
Manchester
M9 6JU

23rd December, 2015

Licensing Section
Trafford Council
Trafford Town Hall
Talbot Road
Stretford
Manchester
M32 0YJ



Dear Sir/Madam

APPLICATION : PL059021 – LA0525/15
(insert number)

PREMISES : Corfu Taverna, 23 The Downs, Altrincham, Cheshire, WA14 2QD
(insert name & address of premises)

I, Spyridon-Dimitrios Papoutsis, as director of Spianada Limited, wish to confirm that the applicant in the above matter is agreeable to include on the operating schedule, the conditions as agreed with Ms Nasreen Ali, Senior Environmental Health Officer, Trafford Council, Regulatory Services and detailed overleaf.
(insert responsible authority/authorities)

I confirm that under the circumstances, I do not consider a full committee hearing to be necessary.

Yours faithfully

Signature :

Name :

SPYRIDON-DIMITRIOS PAPOUTSIS

Date :

23-12-2015

PPN3

"Noise from music and associated sources(including DJ's and amplified voices) must not be audible to such an extent that it constitutes a nuisance at any noise sensitive properties".

PPN4

All external doors and windows shall be kept closed when regulated entertainment is being provided except in the event of an emergency.

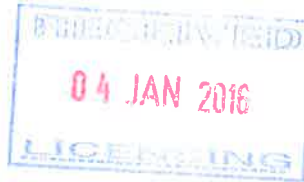
PPN6

There shall be placed at all exits from the premises in a place where they can be seen and easily read by the public, (or member and their guests) notices requiring customers to leave the premises and the area quietly. (Note, this may also include a reference to vehicles).

APPENDIX D

Resident Representation

41 The Downs
Altrincham
WA14 2QG



18 December 2015

Dear Mrs Taylor

Further to my previous letter and our phone conversation yesterday, I have adjusted my letter as requested to only refer to the concerns we have relating to the Corfu Taverna.

As I said on the phone, it is the late night opening that is of concern and we would like to raise an objection (representation). We have two other restaurants, which are busy and great to have on The Downs, but both of which close by 11pm. These opening hours work really well in what is predominantly a residential street and one that has become more residential recently with upper level conversions. The Corfu Taverna restaurant is now surrounded by residential neighbours.

By limiting the hours more, this will create less conflict between residents and the Corfu Taverna. I have spoken to a number of residents who agree. We have had recent difficulties with '24' a late night bar, which was almost directly opposite the Corfu Taverna, and which has subsequently closed. It was a great bar, but just seemed to be in the wrong place. There was a lot of conflict between this bar and its neighbours, due to the late night disturbances it caused. This is our fear for 23 The Downs, which is in almost exactly the same place. Residential neighbours live very close to 23 The Downs and would be disturbed at a time that is not fair to young families, the elderly and any residential neighbour who does not wish to be kept up until the early hours of the following morning.

The residents of The Downs have no problems that I am aware of with the two existing restaurants and this will be mainly due to their earlier closing. The subsequent problems of late night opening such as noise, litter, sick on the pavement, broken bottles, disturbances, etc., has not been a problem, but once a place opens later all of the above do become a reality, as is plain to see on Railway Street every Saturday and Sunday morning, so this is also a big concern.

In summary, we are fine with 11pm closing, but we believe that staying open until 12:30am is not appropriate to a residential area.

Thank you for your help regarding this and I hope I have made the necessary changes that you requested.

Kind regards

Jane Lawrenson