Licensing Authority: Tamworth Borough Council

Application for the review of a premises licence or club premises certificate 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.

1 Home Office Immigration Enforcement				
apply for the review of a premises licence under section 51 / apply for the review of a club premises certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below				
Part 1 – Premises or club premises details				
Postal address of premises or, if none, ord	nance survey map reference or description			
T&J Burgers, 86, Bolebridge Street, Staffordshire				
Post town	Post code (if known)			
Tamworth	B79 7PD `			
Name of premises licence holder or club holding club premises certificate (if known) Mr Junaid Jalil				
Number of premises licence or club premises certificate (if known)				
LN/00005053				
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			— F	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 to	elephone n	umber			
E-mail address (optional)					
(B) DETAILS OF OTHER APPLICANT					
Name and address					
Telephone number (if any)					
E-mail address (opt	tional)				

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Home Office Immigration Enforcement Alcohol Licensing Team Lunar House 40 Wellesley Road Croydon CR9 2BY	
Telephone number (if any)	
E-mail address (optional) IE.Alcoholreviews@homeoffice.gov.uk	
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)	
Grounds for review: We have grounds to believe the license holder has failed to meet the licensing objectives prevention of crime and disorder, as illegal working has been identified at this premises.	s of
Section 36 and Schedule 4 of the Immigration Act 2016 (the 2016 Act) amended the Licensing Act 2003 (the 2003 Act) to introduce immigration safeguards in respect of licensing applications made in England and Wales on or after 6 April 2017. The intention is to prevent illegal working in premises licensed for the sale of alcohol or late-night refreshment.	
The Home Secretary (in practice Home Office (Immigration Enforcement)) was added to the list of Responsible Authorities (RA) in the licensing regime, which requires Home Office (Immigration Enforcement) to receive premises licence applications (except regulated entertainment only licences and applications to vary a Designated Premises Supervisor (DPS)), and in some limited circumstances personal licence applications. In carrying out the role of responsible authority, Home Office (Immigration Enforcement) is permitted to make relevant representations and objections to the grant of a licence or request a review of an existing licence as a responsible authority where there is concern that a licence and related licensable activity is prejudicial to the prevention of immigration crime including illegal working.	

Please provide as much information as possible to support the applicat note 3)	ion (please read guidance	
Please refer to accompanied review pack for detailed information		
	Please tick ✓ yes	
Have you made an application for review relating to the premises before?	Please tick ✓ yes	
premises before?	nth Year	
If yes, please state the date of that application Day Mo If you have made representations before relating to the premises, please	nth Year	
If yes, please state the date of that application Day Mo If you have made representations before relating to the premises, please	nth Year	
If yes, please state the date of that application Day Mo If you have made representations before relating to the premises, please	nth Year	
If yes, please state the date of that application Day Mo If you have made representations before relating to the premises, pleas and when you made them	nth Year	
If yes, please state the date of that application Day Mo If you have made representations before relating to the premises, pleas and when you made them	nth Year	

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 rea	ad
guidance note 5). If signing on behalf of the applicant, please state in what capacity.	

Signature P. Thomas				
Date 12/11/2024				
Capacity Responsible Authority				
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6) Alcohol Licensing Team Lunar House 40 Wellesley Road				
Post town	Post Code			
Croydon	CR9 2BY			
Telephone number (if any)				
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional) IE.Alcoholreviews@homeoffice.gov.uk				

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.

