G2 Haircutters
2 Glengall Road
Kilburn NW6 7EP

02076244171

Licensing Manager, Licensing Team Safer Streets Brent House 349-357 High Road Wembley HA9 6BZ OI JUN 2012

30.05.2012

Re William Hill 141-143 Kilburn High Road Glengall Road-Loiterers, Licence Review Application resubmission.

I would like to resubmit my application for a review of the Gambling Licence at the above premises.

I am resubmitting the application because of an error regarding dates in my original application for a review. I have since this corrected to take account of the issue which was highlighted by the Licence Holders solicitor.

In addition I have been informed that the requirement for Brent Council to advertise the review on their website was not carried out due to a technical fault at the time. Apparently this also means that we have to resubmit the application.

I have never received an acknowledgement from Brent Council regarding my original application, so would appreciate one for this resubmission.

Please let me know as soon as possible if there is anything else I need to do to move this application forward

Thank you

Proprietor

Application for a review of a premises licence under the Gambling Act 2005

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant question). You may wish to keep a copy of the completed form for your records.

Part 1 – Applicant Details
Name of Applicant: Gazmend Turjak
[Where the applicant is an individual please give your first name(s) as well as your surname]
2. Applicant's address (home ☐ or business ☒ [check or tick appropriate box]) G2 Haircutters Glengall Road
London
Postcode: NW6 7EP
3(a) Are you making the application as a responsible authority? Yes ☐ No ☒
3(b) If the answer to question 3(a) is yes, indicate the type of responsible authority:
4(a) If the answer to question 3(a) is no, please confirm by ticking or checking the box that you are applying as an interested party \boxtimes
4(b) If you have ticked or checked the box in answer to question 4(a), please indicate on what basis you qualify as an interested party: Business Owner at the above Address
[Where there are further applicants, the information required by questions 1 to 4(b) should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants"

Part 2 - Premises Details

5. Give the trading name used at the licensed premises to which the application for a review relates: William Hill

6. Give the address of the premi location. Where the premises at licence as the place in the licens possible, any address should inc William Hill 141-143 Kilburn High Road	re a vessel, then (if known) give sing authority's area where the ve	ription of the premises and its the place indicated in the premises essel is wholly or partly situated. If		
Postcode: NW6 7HT				
7. Type of premises:				
Casino [Bingo Hall 🗌	Adult Gaming Centre (arcade restricted to those who are 18 or over)		
Betting (track)	Betting (other) ⊠	Family entertainment centre [] (arcade which admits both over and under 18s)		
8. Premises licence (if known): Betting Shop Gambling				
9. Give the name of the person(s William Hill Group PLC	s) or organisation(s) in whose na	me the licence is held.		
[Where an individual is the licence holder please give their first name(s) as well as their surname.]				
Part 3 – Details of grounds of	an which a review is being s	ought		
10(a) Please give details of the g				
Hill on143 seems to be the only busing the road outside my and of	utside William Hill liam Hill outside William Hill local businesses - making it diffi Residents and Passers by nt of business premises during a petting premises on Kilburn High	and after business hours - William Road where this happens		
potential Health hazard) □ Using the street outside my premises as an unofficial drinking and social club □				
Drinking inside William Hill's Premises. Behaving in an antisocial manner				

Threatening current and potential customers to mine and other businesses

Negative Impact of all of the above on Local Businesses	
Lack of Responsible Management at William Hill	
Negative Impact on my heatlh as I struggle to keep my and other businesses going	
10(b) Indicate any specific actions you consider the licensing authority should take follow review, including the reasons why you consider those actions are appropriate: Refuse renewal of Licence for the reasons outlined above	ving the
Part 4 – Supporting Documents	
11. List any supporting documents which you are submitting with the application: Petition supporting my application from Local Residents and Businesses	
Part 5 – Declarations and Checklist	
I/ We confirm that, to the best of my/ our knowledge, the information contained	
in this application is true. I/ We understand that it is an offence under section	\boxtimes
342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application.	
I/We understand that it is now necessary to give notice to the licence holder	
and the responsible authorities in relation to the premises	
Part 6 - Signatures	
12. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing of the applicant, please state in what capacity:	g on behalf
Signature:	
Print Name: GAZPTEND JURJAK Date: 30/05/2012 (dd/mm/yyyy) Capacity: BUSINESS OWNER	
[Where there is more than one applicant, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include, for each additional applituhe information requested in paragraph 12.]	cant, all

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]

Part 7 – Contact Details

13(a) Please give the name of a person who can be contacted about the application: Mr Gazmend Turjak

13(b) Please give one or more telephone numbers at which the person identified in question 13(a) can be contacted:

02076244171 and 07971872067

14. Postal address for correspondence associated with this application:

G2 Haircutters

Glengall Road

London

Postcode: NW6 7EP

15. If you are happy for correspondence in relation to the application to be sent via e-mail, please give the e-mail address to which you would like correspondence to be sent:

g2haircutters@hotmail.co.uk

NOTICE OF APPLICATION FOR A REVIEW OF A PREMISES LICENCE

This notice is given in accordance with regulations made under section 197 of the Gambling Act 2005		
Notice is hereby given that:		
Gazmend Turjak,		
G2 Haircutters, Glengall Road		
[Give the full name of the applicant(s) as set out in Part 1 of the application for a review of the premises licence]		
has made an application under section 197 of the Gambling Act 2005 for a review of the premises licence which is in force at the following premises: William Hill,		
141- 143 Kilburn High Road		
London		
NW6		
[Give the trading name used at the premises, and the address of the premises (or, if not known, give a description of the premises and their location).]		
The applicant is:		
a responsible authority an interested party [check or tick the appropriate box]		
The following type of premises licence has effect in respect of the premises: Betting Shop Gambling		
[Indicate the type of premises licence which applies to the premises, e.g. bingo premises licence, adult gaming centre premises licence etc.]		
The application for a review of the premises licence has been made to the following licensing authority: Brent Council		
Licensing Manager□Licensing Team □		
Safer Streets □		
Brent House□		
349-357 High Road 🗆		
Wembley□HA9 6BZ		
Postcode: HA9 6B2		
Website: www.brent.gov.uk/		
[Insert name of the licensing authority and the address of its principal office, followed by the address of its website]		
Information about the application is available from the licensing authority, including the		
arrangements for viewing details of the application.		

The following person connected with the applicant is able to give further information about the application: Josie Warshaw, Secretary Brent Eleven Streets, jos [This entry is optional and is to be included if the applicant wishes to provide the name, telephone number and (if available) e-mail address of a person connected with the applicant who is able to answer questions and provide further information about the application.] The grounds on which a review is being sought are: Many antisocial incidents with the "customers" of William Hill Abusing and Threatening staff of local businesses - making it difficult to recruit and retain staff Abusing and Threatening Local Residents and Passers by Persistant Loitering near or in front of business premises during and after business hours Using the road outside my and other premises as a toilet (umiating, defecating and and creating a potential Health hazard) Using the street outside my premises as an unofficial drinking and social club Drinking inside William Hill's Premises. Behaving in an antisocial manner Threatening current and potential customers to mine and other businesses Negative Impact of all of the above on Local Businesses Lack of Responsible Management at William Hill Negative Impact on my heatlh as I struggle to keep my business going

Representations about the application may be made in writing to the licensing authority by the licence holder, a responsible authority or an interested party during the period of 28 consecutive days beginning on 8/06/2012 (which is 7 days after the date on which the application for a review was made to the licensing authority). The last day for making representations is: 6/07/2012

Following a review under section 201 of the Gambling Act 2005 a licensing authority may decide to take any of the following kinds of action:

- revoke the licence
- suspend the licence for a specified period not exceeding 3 months
- add, remove or amend a condition attached to the licence