

**SOUTH DERBYSHIRE DISTRICT COUNCIL**  
Licensing Act 2003

**REPRESENTATION FORM FROM RESPONSIBLE AUTHORITIES**

Responsible Authority (please delete as applicable):

Health and Safety Ref 6447

|                                 |   |
|---------------------------------|---|
| <b>Name</b>                     | Mark Toplass  |
| <b>Job Title</b>                | Food and Health & Safety Officer  |
| <b>Postal and email address</b> | Civic Offices, Civic Way, Swadlincote, Derbyshire, DE11 0AH<br>Mark.toplass@south-derbys.gov.uk |
| <b>Contact telephone number</b> | 01283 595786  |

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| <b>Name of the premises you are making a representation about</b>    | Elvaston Castle Summer Gathering Festival & Madchester             |
| <b>Address of the premises you are making a representation about</b> | Elvaston Castle Country Park Showground, Borrowwash Road, Elvaston |

| <i>Which of the four licensing objectives does your representation relate to?</i> | <i>Yes Or No</i> | <i>Please detail the evidence supporting your representation. Or the reason for your representation. Please use separate sheets if necessary</i> |
|---|------------------|--|
| To prevent crime and disorder   | No               |  |
| Public safety   | Yes              | There is insufficient information submitted with the application to detail how the applicant will ensure public safety                           |
| To prevent public nuisance  | No               |  |
| To protect children from harm   | No               |  |

|   |  |
|---|--|
| <b>Suggested conditions that could be added to the licence to remedy your representation or other suggestions you would like the Licensing Sub Committee to take into account. Please use separate sheets where necessary and refer to checklist.</b> | <ol style="list-style-type: none"> <li>1. Undertake an adequate and suitable risk assessment specific to the event and proposed activities at Elvaston Castle Summer Gathering Festival &amp; Madchester on 18-20<sup>th</sup> August 2018.</li> <li>2. At least 28 days before the commencement of licensed activities an Event Management Plan, devised from the event risk assessment, will be submitted and agreed with South Derbyshire District Council Environmental Health.</li> </ol> |
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Signed: 

Date: 4<sup>th</sup> May 2018

Please return this form along with any additional sheets to the Licensing Section, South Derbyshire District Council, Council Offices, Civic Way, Swadlincote, Derbyshire, DE11 0AH or email to [licensing@south-derbys.gov.uk](mailto:licensing@south-derbys.gov.uk) This form must be returned within the statutory period. For more details please check with the Licensing Office on 01283 595 716/890/724