



Representation	
Premises name	testPremiseName
Application reference number	TEST\PERM-LIC\057347
Last date for representation	12/03/2016

Making a representation as

As an individual

Your details

First name

fname

Last name

lname

Telephone number (optional)

Email address

fname.lname@testvoid.com

Address

218 A Eversholt Street
London
NW1 1BD

Remain anonymous

Yes

Detail the exceptional circumstances

test

Grounds of representation

- prevention of crime and disorder

Details of representation

test

About this form

Issued by

Camden Town Hall
Judd Street
London
WC1H 9JE

Contact phone

020 7974 4444

Data protection

No personal information you have given us will be passed on to third parties for commercial purposes. The Council's policy is that all information will be shared among officers and other agencies where the legal framework allows it, if this will help to improve the service you receive and to develop other services. If you do not wish certain information about you to be exchanged within the Council, you can request that this does not happen.