

# LICENSING ACT 2003

## Record of Complaints

Criminal Justice Act 1987 s.9, Magistrates Court Act 1980 s. 102, Magistrates Court Rules 1981, r.70

Form completed by:

Full Name: .....

Address: .....

.....

Tel No: .....

Address where nuisance is arising: .....

.....

Source of nuisance: .....

Please record the dates, times, the duration and type of nuisance, and how it affected you. Please record events over the next few weeks and then return, together with the Review of Premises Licence Application Form to:

Licensing Services  
Public Health and Protection (East)  
Cornwall Council  
Luxstowe House  
LISKEARD  
PL14 3DZ

Telephone: 01579 341324, 341384,  
341239, or 341371

***The information recorded within this record will assist you in the completion of pages 4 & 5 of the Review of Premises Licence Application Form.***

This statement, consisting of: \_\_\_ pages each signed by me, is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated anything which I know to be false or do not believe to be true.

Dated:.....

Signed: .....

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