

WITNESS STATEMENT

Criminal Procedure Rules, r 27. 2; Criminal Justice Act 1967, s. 9; Magistrates' Courts Act 1980, s.5B

URN [] [] [] []

Statement of: Gonzalo Balta

Age if under 18: Over 18 (if over 18 insert 'over 18')

Occupation: Police Officer

This statement (consisting of 2 page(s) 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 in it anything which I know to be false, or do not believe to be true.

[Redacted Signature]

Signature: (witness) Date: 05-10-21

This statement relates to the Police visit to the Throgmorton Bar, Throgmorton Avenue on Friday 24th September 2021, when cannabis and alcohol were found to be consumed at the premises. On Friday 24.09.21 at approximately 23:45 hours Officers were on a Licensing Deployment along Throgmorton Avenue when attention was drawn to the Throgmorton Bar. The venue appeared to be operating as a bar with a couple of subjects sat outside the entrance area. The lights were on inside and there were 2 males behind the bar and people drinking. This was visible from the outside as the door was open and the light behind the Bar was on. As I went in with PC Paul Dewick & Licensing Officer Ben Ellen, I noticed a potent smell of cannabis in the premises. I contacted PS Ford over my work telephone and he joined us along PC Mohammed Ahmed. Officers conducted a licensing check on the premises and tried to ascertain if they were operating possibly in contravention of a Licensing suspension currently in place, as drugs and alcohol were clearly being consumed in the venue. The venue appeared to be open to the public. The Licensing Officer spoke to the males behind the bar who both denied that there was any exchange of money for the drinks being consumed. Most of the males were IC3 males in their 20s & 30s. There was a small amount of loose cannabis + a small snap bag containing more herbal cannabis & grinder on a small table. The table was a stand-alone table and there were no males using it. We were therefore unable to attribute ownership of the drugs. The males were challenged about this and asked to account for the cannabis on the table. None of them admitted possession or knowledge of the cannabis. A number of these males were visibly under the influence of drugs, speaking incoherently and with diluted eye pupils.

Eventually, a male of Mediterranean appearance came along from the basement floor below the street level and explained that he was temporarily in control of the premises as he was filming at the location. The male provided his details to Police as [Redacted] dob [Redacted] of [Redacted]

[Redacted Signature]

2010/11

Signature: Signature witnessed by:

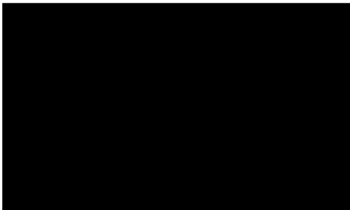
██████ TW2 ██████. He further explained that he was likely to be filming at the location for another week. The male was given words of advice by the Licensing Officer in relation to the consumption of drugs and alcohol at the location. The male was adamant that no money had been exchanged for drinks and that it was a private event, closed to the public. Further to this, the male tried to distance himself from the consumption of drugs at the premises explaining that he could not control if people had come in from outside randomly. It is to be noted that ██████ appeared to be under the influence of drugs as he had slurred speech and dilated pupils.

In view of this explanation, Police conducted an inspection of the basement floor where a cannabis factory had previously been discovered. There were 2 IC1 males drinking by the bar area. One of the males explained that it was a private event and that there was no alcohol for sale. The inspection further revealed a quantity of packed filming equipment. Police seized the aforementioned cannabis and booked it at Bishopsgate Police Station for destruction - Property reference number 2100271048 refers.

Also in the premises, Police spoke to the following male: ██████████ dob ██████████ MIC3 who had previous for PWITS.

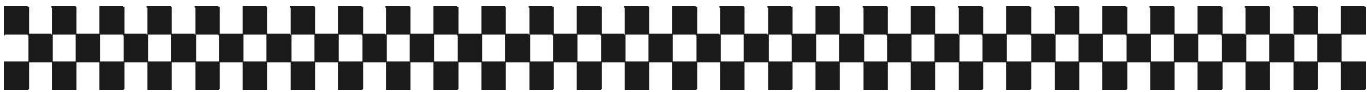
I recorded the whole interaction on my Body Worn Video camera. I present the footage of this interaction as my exhibit GJB-Throgmorton-1.

2010/11



Signature:

Signature witnessed by:



Not Disclosable

Witness contact details

Home address: Postcode:
Home telephone No: Work telephone No:
Mobile: E-mail address:
Preferred means of contact (specify details):
Best time to contact (specify details):
Gender: Date and place of birth:
Former name: Ethnicity Code (16 + 1):

DATES OF WITNESS NON-AVAILABILITY:

Witness care

- a) Is the witness willing to attend court? If 'No', include reason(s) on form **MG6**.
- b) What can be done to ensure attendance?
- c) Does the witness require a Special Measures Assessment as a vulnerable or intimidated witness? (*youth under 18; witness with mental disorder, learning or physical disability; or witness in fear of giving evidence or witness is the complainant in a sexual offence case*) If 'Yes' submit **MG2** with file in anticipated not guilty, contested or indictable only cases.
- d) Does the witness have any particular needs? If 'Yes' what are they? (*Disability, healthcare, childcare, transport, disability, language difficulties, visually impaired, restricted mobility or other concerns?*).

Witness Consent (for witness completion)

- a) The Victim Personal Statement scheme (victims only) has been explained to me Yes No
- b) I have been given the Victim Personal Statement leaflet Yes No
- c) I have been given the leaflet "Giving a witness statement to the police..." Yes No
- d) I consent to police having access to my medical record(s) in relation to this matter (*obtained in accordance with local practice*) Yes No N/A
- e) I consent to my medical record in relation to this matter being disclosed to the defence Yes No N/A
- f) I consent to the statement being disclosed for the purposes of civil, or other proceedings if applicable, e.g. child care proceedings, CICA Yes No N/A
- g) Child witness cases only. I have had the provision regarding reporting restrictions explained to me. Yes No N/A
I would like the CPS to apply for reporting restrictions on my behalf. Yes No N/A

Signature of witness: PRINT NAME:

Signature of parent/guardian/appropriate adult: PRINT NAME:

Address and telephone number (of parent etc.), if different from above:

'I understand that the information recorded above will be passed to the Witness Service, which offers help and support to witnesses pre-trial and at court'

Statement taken by: Station:

Time and place statement taken:



