

## Harrow

Application to vary a premises licence to specify an individual as designated premises supervisor Licensing Act 2003

For help contact

licensing@harrow.gov.uk

Telephone: 020 8901 2600

\* required information

Section 1 of 4		
You can save the form at any t	time and resume it later. You do not need to b	e logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	MCJ.JB 84773.9708	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on behalf of the applicant?		Put "no" if you are applying on your own behalf or on behalf of a business you own or
• Yes O	No	work for.
Applicant Details		
* First name	ASDA STORES LTD	
* Family name	ASDA STORES LTD	
		Include country code.
Other telephone number		
☐ Indicate here if the appl	icant would prefer not to be contacted by tele	phone
Is the applicant:		
<ul><li>Applying as a business</li></ul>	or organisation, including as a sole trader	A sole trader is a business owned by one
Applying as an individual		person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
* Is the applicant's business registered in the UK with Companies House?	Yes No	
* Registration number	00464777	
* Business name	ASDA STORES LTD	If the applicant's business is registered, use its registered name.
* VAT number GB	36201792	Put "none" if the applicant is not registered for VAT.
* Legal status	Private Limited Company	

Continued from previous page		
* Applicant's position in the business	SUPERMARKET	
Home country	United Kingdom	The country where the applicant's headquarters are.
Registered Address		Address registered with Companies House.
* Building number or name	ASDA HOUSE	
* Street	GREAT WILSON STREET	
District		
* City or town	LEEDS	
County or administrative area		
* Postcode	LS11 5AD	
* Country	United Kingdom	
Agent Details		
* First name	GOSSCHALKS SOLICITORS	
* Family name	GOSSCHALKS SOLICITORS	
☐ Indicate here if you wou	ld prefer not to be contacted by telephone	•
Are you:		
<ul> <li>An agent that is a busine</li> </ul>	ess or organisation, including a sole trader	A sole trader is a business owned by one
person without any special legal structure.  A private individual acting as an agent		
Agent Business		
* Is your business registered in the UK with Companies House?	• Yes    No	
* Registration number	02673392	
* Business name	GOSSCHALKS SOLICITORS	If your business is registered, use its registered name.
* VAT number GB	433613472	Put "none" if you are not registered for VAT.
* Legal status	Partnership	

Continued from previous page		
Section 2 of 4		
PREMISES DETAILS		
I/we apply to vary a premises li section 37 of the Licensing Act	cence to specify the individual named in this at 2003.	oplication as the premises supervisor under
* Premises licence number	LN 00000736/2014/11	
	al address, OS map reference or description of t	he premises?
	p reference O Description	
Address		
* Building number or name	ASDA	
* Street	469-479 NORTHOLT ROAD	
District	SOUTH HARROW	
* City or town	MIDDLESEX	
County or administrative area		
Postcode	HA2 8JN	
* Country	United Kingdom	
Contact Details		
Other telephone number		
Describe the premises. For exa	mple, what type of premises it is	

Continued from previous page		
SUPERMARKET		
Section 3 of 4		
SUPERVISOR		
Full Name Of Proposed Desi	gnated Premises Supervisor	
* First name	SEVGI	
* Family name	OR	
Personal licence number of		•
proposed designated premises supervisor	LN000012211	
premises supervisor		
Issuing authority of that licence	HARINGEY COUNCIL	
Full Name Of Existing Design	nated Premises Supervisor	_
First name	SAQIB	
Family name	NOSHER	
* Would you like this application the Licensing Act 2003?	on to have immediate effect under section 38 o	f
<ul><li>Yes</li></ul>	○ No	
* Will the premises licence or rapplication?	relevant part of it be submitted with this	
<ul><li>Yes</li></ul>	○ No	
How will the consent form of to be supplied to the authority?	he proposed designated premises supervisor	
C Electronically, by the pro	posed designated premises supervisor	
<ul> <li>As an attachment to this</li> </ul>	variation	
Reference number for consent		If the consent form is already submitted, ask
form (if known)		the proposed designated premises supervisor for its 'system reference' or 'your
		reference'
Section 4 of 4		
PAYMENT DETAILS		
-	uthority. If you complete the application online,	you must pay it by debit or credit card.
This formality requires a fixed	fee of £23	
DECLARATION		
	nce, liable on conviction to a fine up to level 5 or false statement in or in connection with this ap	

Continued from previous page		
☐ Ticking this box indicates you have read and understood the above declaration		
This section should be comple behalf of the applicant?"	eted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on	
* Date	08 / 07 / 2014 dd mm yyyy	
	Remove this signatory	
	Add another signatory	
OFFICE USE ONLY		
Applicant reference number	MCJ.JB 84773.9708	
Fee paid		
Payment provider reference		
ELMS Payment Reference		
Payment status		
Payment authorisation code		
Payment authorisation date		
Date and time submitted		
Approval deadline		
Error message		
Is Digitally signed		
< Previous <u>1</u> <u>2</u> <u>3</u> <u>4</u>	Next >	

# Consent of individual to being specified as premises supervisor

tiull name prospects premises superviso.

(home address d prospective premise supervisor

(type of application

(name of applicant

(number of existing beence, it any

(name and address of premises to which the application relates

(name of applicant)

iname and address al premises to Which application relates)

(insert personal licence number. it any)

(insert name and address and lefephone number of personal licence issuing authority. If any)

SEVET OR.

of

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

VARIATION OF DESIGNATED PREMISE SUPERVISOR

by ASDA STORES LIMITED

relating to a premises licence

for ASDA

NORTHOLT ROAD SCUTH MARROW TUDDLESEX

and any premises licence to be granted or varied in respect of this application made by ASDA STORES LIMITED

concerning the supply of alcohol at NCUTHCUS RCAD

ASDA

SOUTH HARREN THOOLESEX

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number LN 000012211

Personal licence issuing authority HARINGEN COUNCIL

Signed

SEVGI OR

(please print)

Dated 07 07 2014

## **ENQUIRY FORM**

We confirm that some Constabularies ask for additional information in relation to applications submitted in your name. To save telephone calls, please complete the information below in order that we can provide this to them from the outset of our application.

(Please note this information is not required by law; however this information will speed up the application process).

Name:	0
	Sevgi Or
[	
Date of Birth:	
Date of Birth:	
Diago of Diago	
Place of Birth:	Istanbul/ Turkey
Mobile Tel No:	
Personal Licence No:	LN000012211
Expiry Date of Personal	12/02/2024
Licence:	

Application ref: harrow-123569 Licence: Application to vary a premises licence to specify an individual as designated premises supervisor Applicant name: GOSSCHALKS SOLICITORS GOSSCHALKS SOLICITORS Applicant email: janet\_braithwaite@gosschalks.co.uk Submitted on: 08/07/2014 16:22 Total fee: £23.00 Payment status: Paid Capita ref: 051013 Amount paid: £23.00 Fee outstanding: £0.00 **Application** GOSSCHALKS SOLICITORS GOSSCHALKS SOLICITORS application Supporting documents (2) Premises plan Consent form of DPS **Authority Reference** Reference:

#### Tacit consent applies

Process by: 15/07/2014

Status: Collected on

09/07/2014

Expires: Expires in 6 days on

16-07-2014

### Recent History

#### Notification to

janet\_braithwaite@gosschalks.co.uk: Sent on 08/07/2014 16:25

Notification to

licensing@harrow.gov.uk: Sent on 08/07/2014 16:25

Payment Successful: at 08/07/2014 16:25

Marked as collected: on 09/07/2014 13:21 by ash.waghela@harrow.gov.uk

**Downloaded Consent form of DPS:** on 09/07/2014 13:20 by

ash.waghela@harrow.gov.uk

**Downloaded Premises plan:** on 09/07/2014 13:19 by ash.waghela@harrow.gov.uk

**Downloaded Completed form:** on 09/07/2014 13:19 by ash.waghela@harrow.gov.uk