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<u> </u>	LONCOM	,/

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 time and resume it later. You do not need to be 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 84773.11106	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 o (Yes	n behalf of the applicant? ^ No	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	ASDA STORES LTD	
* Family name	ASDA STORES LTD	
* E-mail	<hr/>	
Main telephone number		Include country code.
Other telephone number		
Indicate here if the	applicant would prefer not to be contacted by te	elephone
Is the applicant:		
Applying as a business or organisation, including as a sole trader A sole trader is a business owned by one		
Applying as an indi	vidual	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		such as following a hobby. ON BOROUGH OF HAR
* Is the applicant's busine registered in the UK with Companies House?	ss (Yes (No	2 2 FEB 2016
* Registration number	00464777	COMMUNITY SAFETY SER
* 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		
* Street		
District		
* City or town		
County or administrative area		
* Postcode		
* Country		
Agent Details		
* First name		
* Family name		
* E-mail		
Main telephone number		Include country code.
Other telephone number		
📋 Indicate here if you wou	Ild prefer not to be contacted by telephone	
Are you:		
An agent that is a busin	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 acti 	ng as an agent	
Agent Business		
* Is your business registered in the UK with Companies House?		
* 1s your business registered outside the UK?	⊂ Yes ● No	
* Business name	02673392	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		
* Your position in the business	LICENSING	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Business Address		If you have one, this should be your official
* Building number or name		address - that is an address required of you by law for receiving communications.
* Street		
District		
* City or town		
County or administrative area		
* Postcode		
* Country		
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 ap 2003.	oplication as the premises supervisor under
* Premises licence number	LN/000007938/2015/4	
Are you able to provide a posta	al address, OS map reference or description of t	he premises?
Address	p reference C Description	
Address		
* Building number or name	ASDA	
* Street	35-43 HIGH STREET	
District	WEALDSTONE	
* City or town	HARROW	
County or administrative area	MIDDLESEX	
Postcode	HA3 5DE	
* Country	United Kingdom	
Contact Details		
E-mail		
Telephone number	C	
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 Desig	gnated Premises Supervisor	
* First name	GAURAV	
* Family name	KAUSHAL	
Personal licence number of		
proposed designated premises supervisor	LBH1L2198	
premises supervisor		
lssuing authority of that licence	LONDON BOROUGH OF HILLINGDON COUNCIL	
Full Name Of Eviating Design	and Decesions Companying	
Full Name Of Existing Design		
First name	TABASSUM	
Family name	MALIK]
* Would you like this application to have immediate effect under section 38 of the Licensing Act 2003?		f
Yes	C No	
* Will the premises licence or r application?	elevant part of it be submitted with this	
Yes	C No	
How will the consent form of the proposed designated premises supervisor be supplied to the authority?		
← Electronically, by the pro	posed designated premises supervisor	
 As an attachment to this 	variation	
		If the consent form is already submitted, ask
Reference number for consent form (if known)		the proposed designated premises
		supervisor for its 'system reference' or 'your reference'
Section 4 of 4		
PAYMENT DETAILS		
This fee must be paid to the au	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		

Continued from previous page	
* I/we understand it is an offence, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the licensing act 2003, to make a false statement in or in connection with this application.	
Ticking this box indicates you have read and understood the above declaration	
This section should be compl behalf of the applicant?"	eted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	GOSSCHALKS
* Capacity	SOLICITORS FOR AND ON BEHALF OF THE APPLICANTS
* Date	22 / 02 / 2016 dd mm yyyy
	Remove this signatory
	Add another signatory
OFFICE USE ONLY	
Applicant reference number	MCJ.JB 84773.11106
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 >

Part A

Consent of Individual to Being Specified as Premises Supervisor

(1) Insert full name of prospective premises supervisor.

(2) Insert home address of prospective premises supervisor.

(3) Insert type of application.

(4) Insert name of applicant.

(5) insert number of existing licence, if any.
(6) Insert name and address of premises to which the application relates.

(7) Delete as applicable.

(8) Insert personal ficence number, if any.
(9) Insert name and address and telephone number of personal licence issuing authority, if any.

(10) Please print.

l (1) GAURAV KAUSHAL



hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for (3) VARIATION OF THE DESIGNATED PREMISES SUPERVISOR by (4) ASDA STORES LIMITED

relating to a premises licence (5) LN/000007938/2015/4

for (6) ASDA 35-43 HIGH STREET WEALDSTONE HARROW, HA3 SDE and any premises licence to be granted or varied in respect of this application made by (4) ASDA STORES LIMITED

concerning the supply of alcohol at (6) ASDA 35-43 HIGH STREET WEALDSTONE HARROW HA3 5DE

I also confirm that I (7) (an capping tor; (7) (an capping tor; (7) (currently hold) a personal licence, details of which I set out below.

Personal licence number (8)

LBH112198

Personal licence issuing authority (9)



Dated

Yez 7 Spa Road, London SE 16 3QQ Crown copyright -DHILZ MO

Licensing 20

BOROUGH OF HILLINGON. UXBRIDGE UB810W.

ENT 03/10/2011



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:	GAVRAV HAUSHAL.