

* required information

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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 This is the unique reference for this application generated by the system.

Your reference 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?

Yes 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

* Family name



Include country code.

Indicate here if you would prefer not to be contacted by telephone

Are you:

Applying as a business or organisation, including as a sole trader
 Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

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Your Address

Address official correspondence should be sent to.

* Building number or name

* Street

District

* City or town

County or administrative area

* Postcode

* Country

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PREMISES DETAILS

I/we, as named in section 1, apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in section 2 below.

Premises Licence

* Premise licence number

Name Of Current Premises Licence Holder

* Name

Premises Address

Are you able to provide a postal address, OS map reference or description of the premises?

- Address OS map reference Description

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Further Details

Please give a brief description of the premises

its a fast food fried chicken shop with eat inn and takeaway

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Telephone number at the premises if any

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APPLICATION DETAILS

In what capacity are you applying for the premises licence to be transferred to you?

- An individual or individuals
- A limited company
- A partnership
- An unincorporated association
- A recognised club
- A charity
- The proprietor of an educational establishment
- A health service body
- A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- The chief officer of police of a police force in England and Wales
- Other (for example a statutory corporation)

Please confirm the following:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
- I am making the application pursuant to a statutory function
- I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative

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INDIVIDUAL APPLICANT DETAILS

Applicant Name

Is the name the same as (or similar to) the details given in section one?

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

Yes

No

First name

Amirali

Family name

Akberali

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Is the applicant 18 years of age or older?

Yes No

Applicant Postal Address

Is the address the same as (or similar to) the address given in section one?

Yes No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

Building number or name	229
Street	station road
District	harrow
City or town	london
County or administrative area	uk
Postcode	ha1 2tb
Country	United Kingdom

Applicant Contact Details

Are the contact details the same as (or similar to) those given in section one?

Yes No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely set of details.

E-mail	
Telephone number	
Other telephone number	

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FURTHER INFORMATION

Are you the holder of the premises licence under an interim authority notice?

Yes No

Do you wish the transfer to have immediate effect?

Yes No

Have you attached the consent form signed by the existing premises licence holder?

Yes No

Please enter your reasons. What steps have you taken to obtain consent?

I am a new on coming tenant to 229 station road HA1 2TB Harrow, I could not find the consent form online and I went to Harrow council as well to ask them but they said they don't know what it is. But i am aware of the business and its risk. I would really appreciate and i would be pleased to provide any documents which are required after I submit this old

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licence from previous owner.

If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003)?

Yes No

Have you attached the previous licence?

Yes No

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.
This formality requires a fixed fee of £23

DECLARATION

* 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 completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name

Amirali Akberali

* Capacity

Owner / Director

* Date

02 / 10 / 2014
dd mm yyyy

Full name

Amirali Akberali

Capacity

Owner / director

* Date

02 / 10 / 2014
dd mm yyyy

Remove this signatory

Add another signatory

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
 2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/harrow/change-3> to upload this file and continue with your application.
- Don't forget to make sure you have all your supporting documentation to hand.

OFFICE USE ONLY

Applicant reference number	Chicken Cottage
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	<input type="checkbox"/>

Consent of premises licence holder to transfer

I/we Bari Mohammed Abdul
[full name of premises licence holder(s)]

the premises licence holder of premises licence number LN/000001100/2010/2
[insert premises licence number]

relating to Chicken Cottage
229 Station Road, Hellow HA1 2TB
[name and address of premises to which the application relates]

hereby give my consent for the transfer of premises licence number

LN/000001100/2010/2
[insert premises licence number]

to Amirali Akberali

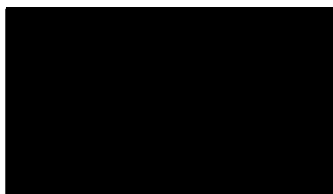
[full name of transferee].

signed

name

(please print)

dated



Bari Mohammed Abdul

6.10.2014