

## Harrow Application to transfer premises licence Licensing Act 2003

For help contact

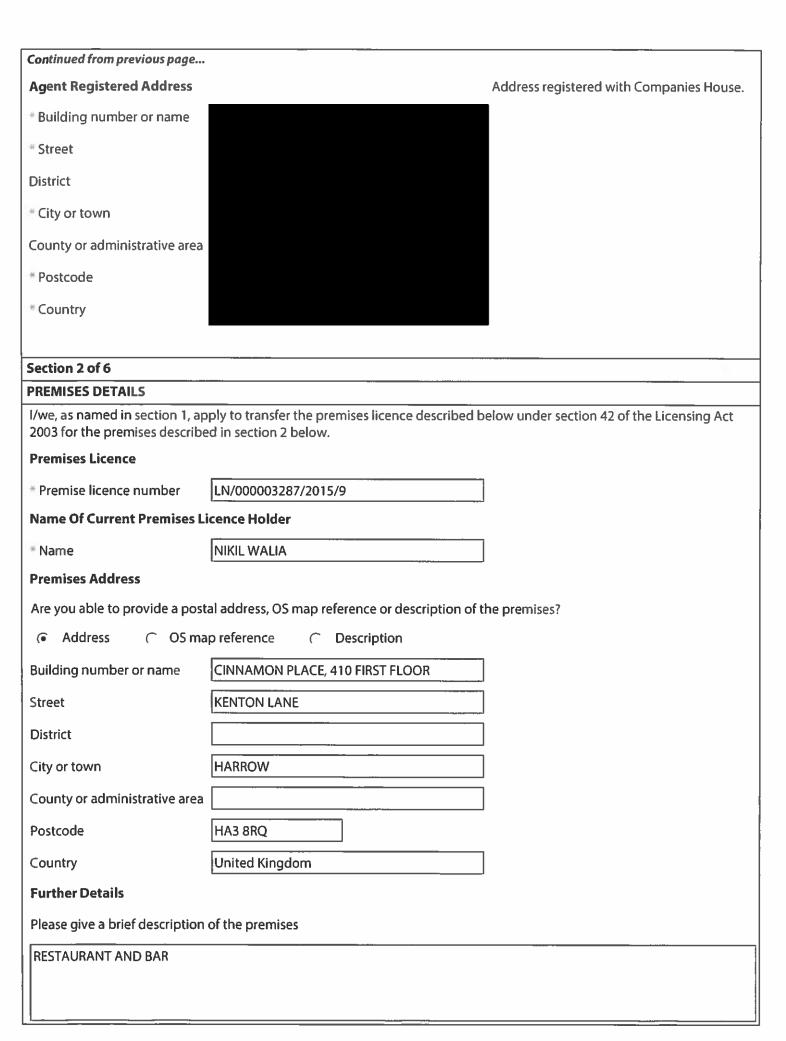
licensing@harrow.gov.uk

Telephone: 020 8901 2600

required information

Section 1 of 6					
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		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 be	half of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or			
	lo	work for.  RECEIVED  RECEIVED			
Applicant Details		( ( 08 JUN 2016 ) )			
* First name	UTHAMA KUMARA	COMMUNITY SAFETY SERVICES			
* Family name	NAIDU	WY SAFETY OF			
* E-mail					
Main telephone number		Include country code.			
Other telephone number					
Indicate here if the applicant would prefer not to be contacted by telephone					
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 individual	al	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.			

## Continued from previous page... **Address** \* Building number or name \* Street District \* City or town County or administrative area \* Postcode \* Country **Agent Details** \* First name \* Family name # E-mail Include country code. Main telephone number Other telephone number Indicate here if you would prefer not to be contacted by telephone Are you: • An agent that is a business 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 Yes No in the UK with Companies House? 8832658 \* Registration number If your business is registered, use its \* Business name COMPLIANCE DIRECT LTD registered name. Put "none" if you are not registered for VAT. \* VAT number GB 204 9151 33 \* Legal status Private Limited Company \*Your position in the business DIRECTOR The country where the headquarters of your United Kingdom Home country business is located.



Continued from previous page				
Telephone number at the premises if any				
Section	on 3 of 6			
APPL	ICATION DETAILS			
In wh	In what capacity are you applying for the premises licence to be transferred to you?			
$\boxtimes$	An individual or individua	als		
	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:				
$\boxtimes$	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			
Section 4 of 6				
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				
@ Y	'es	C No	from section one, or amend them as required. Select "No" to enter a completely new set of details.	
First name		UTHAMA KUMARA		
   Famil	ly name	NAIDU		

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Continued from previous page				
Is the applicant 18 years of age or older?				
C Yes C No				
Applicant Postal Address Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details		
	← No	from section one, or amend them as required. Select "No" to enter a completely new set of details.		
Building number or name				
Street				
District				
City or town				
County or administrative area				
Postcode				
Country				
Applicant Contact Details				
Are the contact details the sam	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as		
	C No	required. Select "No" to enter a completely new set of details.		
E-mail		new set of details.		
Telephone number				
Other telephone number				
	Add another applicant			
Section 5 of 6				
FURTHER INFORMATION				
Are you the holder of the pren	nises licence under an interim authority notice?			
← Yes ← No				
Do you wish the transfer to have immediate effect?				
Have you attached the consent form signed by the existing premises licence holder?				
← Yes				
Please enter your reasons. What steps have you taken to obtain consent?				
MR WALIA HAS NOT REPLIED TO OUR CALLS. WE HAVE ATTACHE LEASE TO DEMINSTRATE THAT MR NAIUDU HAS LEGAL POSSESSION AND THE RIGHT TO OCCUPY PREMISES.				

Continued from previous page				
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)?				
Have you attached the previous	licence?			
Section 6 of 6				
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 fe	e 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	PUTHRASINGAM SIVASHANKAR			
* Capacity	AUTHORISED AGENET			
* Date	08 / 06 / 2016			
	dd mm yyyy			
	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 <a href="https://www.gov.uk/apply-for-a-licence/premises-licence/harrow/change-3">https://www.gov.uk/apply-for-a-licence/premises-licence/harrow/change-3</a> to upload this file and continue with your application.  Don't forget to make sure you have all your supporting documentation to hand.				

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