## Application to transfer premises licence to be granted under the Licensing Act 2003

## PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

I/We PRAKASH PRADHAN (Insert name of applicant) apply to transfer the premises licence describe	ad holony under continu 42 - E41 - E
2003 for the premises described in Part 1 belo	w
Premises licence number	LN/000003641/2011/2
Part 1 – Premises details	
Postal address of premises or, if none, ordnand CLUB KTM 32 RAILWAY APPROACH WEALDSTONE	ce survey map reference or description
Post town HARROW	Post code HA3 5AA
Telephone number at premises (if any)	
Please give a brief description of the premises BAR AND RESTAURANT	(see note 1)
Name of current premises licence holder STAR SPICE LIMITED	
Part 2 - Applicant details In what capacity are you applying for the premise	es licence to be transferred to you?
	Please tick ☑ yes
a) an individual or individuals*	please complete section (A)
b) a person other than an individual * i. as a limited company	please complete section (B)
ii. as a partnership	please complete section (B)  please complete section (B)  Signature of Officer Authenticated
	2 6 MAY 2017
	CAMAY 2017

I am 18 yea	Please tick ☑ yes rs old or over ☑
PRADHAN	AKASH
	rst names
Mr Mrs Miss Ms	Other title (for example, Rev)
(A) INDIVIDUAL APPLICANTS (fill in as applicable	e)
<ul> <li>statutory function or</li> <li>a function discharged by virtue of Her</li> </ul>	Majesty's prerogative
I am making the application pursuant to a	
<ul> <li>I am carrying on or proposing to carry on a bus of the premises for licensable activities; or</li> </ul>	siness which involves the use
	Please tick ☑ yes
*If you are applying as a person described in (a) or (b)	please confirm:
h) the chief officer of police of a police force in England and Wales	please complete section (B)
ga) a person who is registered under Chapter 2 of P. I of the Health and Social Care Act 2008 (within the meaning of that Part) in respect of an independent hospital in England	e please complete section (B)
g) an individual who is registered under Part 2 of th Care Standards Act 2000 (c14) in respect of an independent hospital in Wales	e please complete section (B)
f) a health service body	please complete section (B)
e) the proprietor of an educational establishment	please complete section (B)
d) a charity	please complete section (B)
c) a recognised club	please complete section (B)
iv. other (for example a statutory corporation)	please complete section (B)
iii, as an unincorporated association or	please complete section (B)

E-mail address (optional)		
SECOND INDIVIDU	AL APPLICANT (fill in as applicable)	
Mr Mrs	Miss Ms Other title	
Surname	(for example, Rev)  First names	
•	Please tick ☑ yes	
Date of birth Nationality	I am 18 years old or over	
Current		
address if different from		
premises address		
Post town	Post code	
_		
Daytime contact telephone number		
E-mail address (optional)		
(optional)		

## (B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)
Part 3 Please tick ☑ yes
Are you the holder of the premises licence under an interim authority notice?
Do you wish the transfer to have immediate effect?
If not when would you like the transfer to take effect?
Day Month Year
Please tick ☑ yes
have enclosed the consent form signed by the existing premises licence holder
f you have not enclosed the consent form referred to above please give the reasons why not. What teps have you taken to try and obtain the consent?

	Please tick 🗹	yes
If this application is granted I would be in a position to use the premises during application period for the licensable activity or activities authorised by the licensection 43 of the Licensing Act 2003)	the ice (see	$\boxtimes$
	Please tick ☑	yes
I have enclosed the premises licence		$\boxtimes$
If you have not enclosed premises licence referred to above please give the reas	ons why not.	

I have made or enclosed payment of the fee

 $\boxtimes$ 

 I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed

I have enclosed the premises licence or relevant part of it or explanation

I have sent a copy of this application to the chief officer of police today

I have sent a copy of this form to Home Office Immigration Enforcement today

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971] FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

I understand I am not entitled to be issuedwith a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 2)

Part 4 – Signatures (please read guidance note 3)			
Signature of note 4). If sig	f applicant or applicant's solicitor gning on behalf of the applicant pl	or other duly authorised agent (See guidance ease state in what capacity.	
Signature			
	26-05-2017		
*************			
	DULY AUTHORISED AGENT		
	***************************************		
For joint appauthorised a state in what	gent (please read guidance note 5).	eant, second applicant's solicitor or other If signing on behalf of the applicant please	
Signature			
***************	***************************************		
Date			
Capacity			
******			
associated wi	ith this application (please read gui LICENCE COURSES LTD HOUSE	d postal address for correspondence dance note 6)	
Post town		Post Code	
HAYES		UB4 8JX	
		y e-mail your e-mail address (optional)	
399			

## Consent of premises licence holder to transfer

		I/we STAR SPICE CIMITED  [full name of premises licence holder(s)]	
		the premises licence holder of premises licence number a	LN/CODDO3641/2011/2
	relating to	,	
THE	ETMZ	[name and address of premises to which the application relates]	ncy, we a costone, HARAOU, HAS SA
		hereby give my consent for the transfer of premises licence	ce number
		LN/00003641/2011/2 [insert premises licence number]	
		to	
		PRAICASH PRADMAN [full name of transferee]	***************************************
ĕ			

signed name

dated

(please print)

RAMESH BHIMSI (DIRECTOR).

04/04/2017