Application to vary a premises licence to specify an individual as designated premises supervisor 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 Aashish Patel	
(full name(s) of premises licence holder)	
being the premises licence holder, apply to vary a premis	ses licence to specify
the individual named in this application as the premises	supervisor under
section 37 of the Licensing Act 2003	
Premises licence number	
LN000000969/2017/14	
_	
Part 1 – Premises details	
Postal address of premises or, if none, ordnance survey	map reference or
description	
Daal Roti Vegetarian Restaurant 397 Honeypot Lane	
1007 Floricypot Lane	
Post town	Post code (if known)
Post town London	Post code (if known) HA7 1JJ
London	
London	
Telephone number (if any)	
London	
Telephone number (if any)	
Telephone number (if any)  Description of premises (please read guidance note 1)	
Telephone number (if any)  Description of premises (please read guidance note 1)	
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Telephone number (if any)  Description of premises (please read guidance note 1)	



## Part 2

Aashish Patel	
Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any) Harrow-LN/000008930/2016/1	
Full name of existing designated premises supervisor (if any) Karthik Srinivasaiah	
Please tick	yes
I would like this application to have immediate effect under section 38 of the Licensing Act 2003	1
I have enclosed the premises licence or relevant part of it	
(If you have not enclosed the premises licence, or relevant part of it, please give reasons why not)	
Reasons why I have failed to enclose the premises licence or relevant part	of it
Please tick	yes
I have made or enclosed payment of the fee     I will give a copy of this application to the chief officer of police.	
I have enclosed the consent form completed by the proposed premises	
supervisor  I have enclosed the premises licence, or relevant part of it or explanation	$\boxtimes$
<ul> <li>I will give a copy of this form to the existing premises supervisor, if any</li> <li>I understand that if I do not comply with the above requirements my</li> </ul>	$\boxtimes$
application will be rejected	

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.

Part 3 – Signatures (please read guidance note 2)

Signature of applicant or applicant's sol (See guidance note 3). If signing on beha capacity.  Signature		
••••••	••••••	
Date 06/08/17	f <sub>/i-j</sub>	
Capacity License	older	
For joint applicants signature of 2 <sup>nd</sup> appl authorised agent (please read guidance n applicant please state in what capacity.	icant 2 <sup>nd</sup> applicant's solicitor or other ote 4). If signing on behalf of the	
Signature		
Date	••••••	
Capacity		
• • • • • • • • • • • • • • • • • • • •		
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)		
Post town	Post Code	
. 000 101111	1 03: 0046	
Telephone number (if any)		
If you would prefer us to correspond wit (optional)	h you by e-mail your e-mail address	

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

## Guidance notes

- 1. Describe the premises. For example the type of premises it is.
- 2. The application form must be signed.
- 3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- 5. This is the address which we shall use to correspond with you about this application.

## Consent of individual to being specified as premises supervisor

	Aashish Dipakray Patel	
I	[full name of prospective prem	nises supervisor]
Of		
[home	address of prospective premis	ses supervisor]
super	by confirm that I give my visor in relation to the appringes Licence	consent to be specified as the designated premises plication for
(type	of application]	
by Aas	hish Patel	
[name	of applicant]	
relatiı	ng to a premises licence	LN/00009694/2016/13 [number of existing licence, if any]
for		
	l Roti Vegetarian Restaur Honeypot Lane, London	
(name	and address of premises to wh	ich the application relates]

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

[name of applicant]	
397 Hon	falcohol at  PET Vegelizionia Participana eggoot Laine HA7 ITI.
[name and address of premis	ses lo which application relates)
	entitled to work in the United Kingdom and am applying for currently hold a personal licence, details of which I set out
Personal licence numbe  LN/0000	9953/2016/1
Personal licence issuing	authority
Harrow Counci	L. CIVIC CENTRE, HAL ZUT, 6208863561 d telephone number of personal licence issuing authority, if any)
Signed	
Name (please print)	AASHISH PATEL
Date	19/06/2017