

Harrow

Application to vary a premises licence to specify an individual as designated premises supervisor Licensing Act 2003

For help contact

<u>licensing@harrow.gov.uk</u> Telephone: 020 8901 2600

* required information

Section 1 of 4				
You can save the form at any t	ime 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		
Yes	No	work for.		
Applicant Details				
* First name	CONSAN			
* Family name	MYLVAKANAM			
* E-mail				
Main telephone number		Include country code.		
Other telephone number				
	icant would prefer not to be contacted by telep	hone		
Is the applicant:				
 Applying as a business of 	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.		
Applicant Business				
* Is the applicant's business registered in the UK with Companies House?	Yes			
* Registration number	8560929			
* Business name	YARLKANI FOOD AND WINE LIMITED	If the applicant's business is registered, use its registered name.		
* VAT number	164412623	Put "none" if the applicant is not registered for VAT.		
* Legal status	Private Limited Company			

*Applicant's position in the business MANAGING DIRECTOR Home country United Kingdom The country where the applicant's headquarters are. **Registered Address Address Address registered with Companies House. **Building number or name 183 Address registered with Companies House. **Street BURNT OAK BROADWAY District EDGEWARE **City or town LONDON County or administrative area MIDDLESEX **Postcode HA8 5EH **Country United Kingdom **Agent Details **First name NOEL **Family name SAMAROO **E-mail Main telephone number Other telephone number Other telephone number Include country code. A sole trader is a business owned by one person without any special legal structure. **Agent Business** **Is your business registered Yes No in the UK with Companies National Training and Development If your business is registered, use its registered name. **Put "none" if you are not registered for VAT.	Continued from previous page			
Registered Address Registered Address Building number or name Street BURNT OAK BROADWAY District EDGEWARE *City or town LONDON County or administrative area *Postcode *Agent Details *First name NOEL *Famil Main telephone number Other telephone number Indicate here if you would prefer not to be contacted by telephone Are you: A private individual acting as an agent Agent Business *Is your business registered Yes No Notional Training and Development If your business is registered, use its registered name. National Training and Development Put "none" if you are not registered for VAT.		MANAGING DIRECTOR		
Registered Address * Building number or name * Street BURNT OAK BROADWAY District EDGEWARE * City or town LONDON County or administrative area MIDDLESEX * Postcode HA8 5EH * Country United Kingdom Agent Details * First name NOEL * Family name SAMAROO * E-mail Main telephone number Other telephone number Indicate here if you would prefer not to be contacted by telephone Are you: A nagent that is a business or organisation, including a sole trader A private individual acting as an agent Agent Business * Is your business registered in the UK with Companies House? * Business name National Training and Development If your business is registered, use its registered name. Put "none" if you are not registered for VAT.		United Kingdom		
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* City or town County or administrative area MIDDLESEX * Postcode * Postcode * Country United Kingdom Agent Details * First name NOEL * Family name SAMAROO * E-mail Main telephone number Include country code. 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 private individual acting as an agent Agent Business * Is your business registered Yes No No If your business is registered, use its registered, use its registered name. * United Kingdom * Has 5EH * Country * Business name National Training and Development If your business is registered, use its registered name. Put "none" if you are not registered for VAT.	* Street	BURNT OAK BROADWAY		
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* Postcode	* City or town	LONDON		
* Country United Kingdom Agent Details * First name NOEL * Family name SAMAROO * E-mail Main telephone number Include country code. 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. Agent Business * Is your business registered Yes No in the UK with Companies House? * Is your business registered Yes No outside the UK? * Business name National Training and Development registered for VAT.	County or administrative area	MIDDLESEX		
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* Family name * E-mail 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 private individual acting as an agent Agent Business * Is your business registered in the UK with Companies House? * Is your business registered outside the UK? * Business name National Training and Development National Training and Development Put "none" if you are not registered for VAT.	Agent Details			
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Agent Business * Is your business registered of Yes No No In the UK with Companies House? * Is your business registered of Yes No	Are you:			
A private individual acting as an agent Agent Business * Is your business registered in the UK with Companies House? * Is your business registered in the UK? * Is your business registered in the UK? * Business name National Training and Development If your business is registered, use its registered name. * VAT number Put "none" if you are not registered for VAT.	An agent that is a busine	ess or organisation, including a sole trader	A sole trader is a business owned by one	
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in the UK with Companies House? * Is your business registered outside the UK? * Business name National Training and Development Put "none" if you are not registered for VAT.	Agent Business			
* Business name National Training and Development VAT number National Training and Development Put "none" if you are not registered for VAT.	in the UK with Companies	○ Yes		
* VAT number		○ Yes		
Thome - Inote	* Business name	National Training and Development		
	* VAT number	none	Put "none" if you are not registered for VAT.	
* Legal status Sole Trader	* Legal status	Sole Trader		

Continued from previous page		
* Your position in the business	owner	
Home country	United Kingdom	The country where the headquarters of your business is located.
		If you have one, this should be your official
		address - that is an address required of you by law for receiving communications.
]
		1
Section 2 of 4		
PREMISES DETAILS	:	
section 37 of the Licensing Act	icence to specify the individual named in this a 2003.	pplication as the premises supervisor under
* Premises licence number	L/N 000000785/2013/4	
Are you able to provide a post	al address, OS map reference or description of	the premises?
	p reference O Description	•
Address		
* Building number or name	YARLKANI FOOD AND WINE	
* Street	462 ALEXANDER AVENUE	
District	RAYNERS LANE	
* City or town	LONDON	
County or administrative area	HARROW	
Postcode	HA2 9TL	
* Country	United Kingdom	1
•	Offited Kingdom	
Contact Details		
E-mail		
Telephone number		
Other telephone number		
Describe the premises. For exa	mple, what type of premises it is	

Cantinual frame musciana masa		
Continued from previous page		
GENERAL STORE WITH SALE O	F ALCOHOL BY RETAIL	
Section 3 of 4		
SUPERVISOR		
	wated December Companying	
Full Name Of Proposed Desig		
* First name	CONSAN	
* Family name	MYLVAKANAM	
Personal licence number of		
proposed designated premises supervisor	04023	
Issuing authority of that		
licence	LONDON BOROUGH OF EALING	
Full Name Of Existing Design	nated Premises Supervisor	
First name	BALASINGAM	
Family name	WIJAYABALACHANDRAN	
		:
* Would you like this application the Licensing Act 2003?	on to have immediate effect under section 38 of	
Yes	○ No	
* Will the premises licence or rapplication?	elevant part of it be submitted with this	
Yes	○ No	
How will the consent form of t be supplied to the authority?	he proposed designated premises supervisor	
○ Electronically, by the pro	posed designated premises supervisor	
As an attachment to this	variation	
Reference number for consent		If the consent form is already submitted, ask
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	thority. If you complete the application online,	you must pay it by debit or credit card.
This formality requires a fixed f	fee of £23	
ATTACHMENTS		
AUTHORITY POSTAL ADDRES	SS	

Continued from previous page	
Address	
Building number or name	
Street	
District	
City or town	
County or administrative area	
Postcode	
Country	United Kingdom
DECLARATION	
	ce, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the false statement in or in connection with this application.
☐ Ticking this box indicate	es you have read and understood the above declaration
This section should be complet behalf of the applicant?"	red by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
Signature Of Applicant Or Ap	plicant's Solicitor
* Full name	
* Capacity	
Date (dd/mm/yyyy)	
Joint Applicants, Signature O	f Second Applicant Or Second Applicants Solicitor
Full name	
ruii name	
Capacity	
Date (dd/mm/yyyy)	
	Remove this signatory
	Add another signatory

Consent of individual to being specified as premises supervisor

MR CONSAN MYLVAKANAM [full name of prospective premises supervisor] [home address of prospective premises supervisor] hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for RETAIL SALE OF ALCOHOL [type of application] by YARLKANI FOOD AND WINE LTD [name of applicant] 000000785/2013/4 relating to a premises licence [number of existing licence, if any] for YARLKANI FOOD AND WINE **462 ALEXANDRA AVENUE** RAYNERS LANE

[name and address of premises to which the application relates]

HA2 9TL

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

V	ARI	KAN	JI F	COD	AND	WINE	LTD
	\neg i $^{\perp}$	ווארוו	41 I	OOD	MIND	AAIIAE	

[name of applicant]

concerning the supply of alcohol at

YARLKANI FOOD AND WINE
462 ALEXANDRA AVENUE
RAYNERS LANE
HA2 9TL

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number 04023

[insert personal licence number, if any]

Personal licence issuing authority LONDON BOROUGH OF EALING

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed

Name (please print)

MR CONSAN MYLVAKANAM

Date

27.01.2014