London Borough of Harrow

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.

Tournay monto keep a copy of the completed form for your f	000140.			
We ASK Restaurants Limited				
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				
LN/00000520/2013/10A				
Part 1 – Premises details				
Postal address of premises or, if none, ordnance survey map reference or description				
Zizzi				
6-7 High Street				
Post town	Post code (if known)			
Pinner	HA5 5PW			
Telephone number (if any)				
Description of premises (places read guidenes note 1)				
Description of premises (please read guidance note 1) Restaurant serving alcohol and food				
Residurant serving alconor and 1000				
Part 2				
Full name of proposed designated premises supervisor				
Mr Artur Len				
Wil / Vital Earl				
Personal licence number of proposed designated premise	es supervisor and			
issuing authority of that licence (if any)				
KE-PE 00155 – Canterbury City Council				
Full name of existing designated premises supervisor (if	any)			
Mr Deep Raj Kunwar				
	Please tick yes			
I would like this application to have immediate effect under	$\overline{\checkmark}$			
section 38 of the Licensing Act 2003				
I have enclosed the premises licence or relevant part of it	lacksquare			
(If you have not enclosed the premises licence, or relevant pa	rt of it, please give			
reasons why not)				
Reasons why I have failed to enclose the premises licence	e or relevant part of it			

	Please tick	ye
•	I have made or enclosed payment of the fee	V
	I will give a copy of this application to the chief officer of police	v
•	I have enclosed the consent form completed by the proposed premises supervisor	v
	I have enclosed the premises licence, or relevant part of it or explanation	v
	I will give a copy of this form to the existing premises supervisor, if any	5
•	I understand that if I do not comply with the above requirements my application will be rejected	5
PPL	AKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS ICATION - Signatures (please read guidance note 2)	
	ture of applicant or applicant's solicitor or other duly authorised agen juidance note 3). If signing on behalf of the applicant please state in wh	
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Guidance notes

- Describe the premises. For example the type of premises it is.
 The application form must be signed.
 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

To be completed in block capitals

I Mr Artur Len of	nereby confirm that I
give my consent to be specified as the Designated Premises Supervisor in re	elation to the
application for a Variation of Designated Premises Supervisor - Artur Len by	ASK Restaurants
Limited relating to a Premises Licence LN/00000520/2013/10A for Zizzi, 6-	-7 High Street,
Pinner, HA5 5PW and any premises licence to be granted or varied in respe	ct of this application
made by ASK Restaurants Limited concerning the supply of alcohol at Zizzi,	6-7 High Street,
Pinner, HA5 5PW	

I also confirm that I hold a personal licence, details of which I set out below:

Personal Licence Number:-

KE-PE 00155

Personal Licence Issuing Authority:- Canterbury City Council

Signed

Name Printed

Dated

O3/07/25#

ENQUIRY FORM

We confirm that some Constabularies ask for additional information in relation to applications submitted in your name. To save telephone calls, please complete the information below in order that we can provide this to them from the outset of our application.

Please note this information is not required by law; however as you are aware the Police do like to meet with all new applicants therefore provision of this information will speed up the application process.

Name:	ARTUR LEW
Date of Birth:	
Place of Birth:	WRO CLAW, POLAND
National Insurance Number:	SE 710760A
Mobile Tel.No:	02221
Expiry Date of Personal Licence:	23/08/2015