

**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

(Insert name of applicant)

apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

LN/000000895/2011/7

**Part 1 – Premises details**

Postal address of premises or, if none, ordnance survey map reference or description

120 HIGH STREET  
HARROW WEALDSTONE

Post town

HARROW

Post code

HA3 7AL

Telephone number at premises (if any)

Please give a brief description of the premises

Food and wine Convenience Store

Name of current premises licence holder

PIRABA IYATHURAI

**Part 2 - Applicant details**

In what capacity are you applying for the premises 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)

iii. as an unincorporated association or

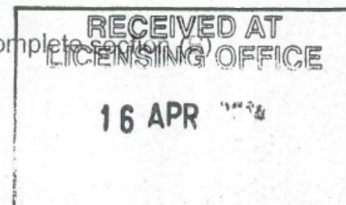
☐ please complete section (B)

iv. other (for example a statutory corporation)

☐ please complete section (B)

c) a recognised club

☐ please complete section (A)



- d) a charity ☐ please complete section (B)
- e) the proprietor of an educational establishment ☐ please complete section (B)
- 
- f) a health service body ☐ please complete section (B)
- 
- g) an individual who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

\*If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or ☐
- I am making the application pursuant to a
  - statutory function or ☐
  - a function discharged by virtue of Her Majesty's prerogative ☐

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

Mr ☒ Mrs ☐ Miss ☐ Ms ☐ Other title   
(for example, Rev)

Surname

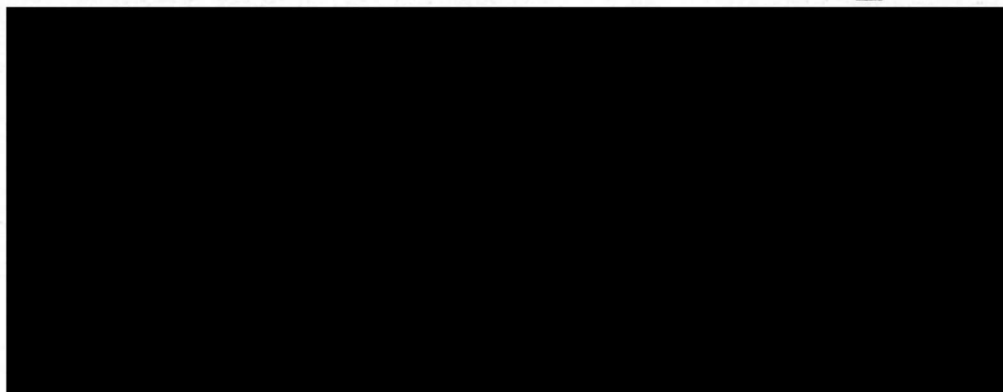
SRI THARAN

First names

SINNATHAMBY

I am 18 years old or over

Please tick yes



E-mail address  
(optional)

**SECOND INDIVIDUAL APPLICANT** (fill in as applicable)

Mr ☐

Mrs ☒

Miss ☐

Ms ☐

Other title   
(for example, Rev)

Surname

JANANI

First names

SRI THARAN

I am 18 years old or over

Please tick yes



[Redacted area]

**(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) thbuthb
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
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please tick yes

I have enclosed the consent form signed by the existing premises licence holder ☒

If you have not enclosed the consent form referred to above please give the reasons why not. What steps 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 the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003) ☒

Please tick yes

I have enclosed the premises licence ☒

If you have not enclosed premises licence referred to above please give the reasons why not.

- I have made or enclosed payment of the fee
- 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 understand that if I do not comply with the above requirements my application will be rejected



**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**

**Part 4 – Signatures** (please read guidance note 2)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (See guidance note 3). **If signing on behalf of the applicant please state in what capacity.**

Signature

Date

01/04/2014

Capacity

**For joint applicants signature of 2<sup>nd</sup> applicant, 2<sup>nd</sup> applicant's solicitor or other authorised agent** (please read guidance note 4). **If signing on behalf of the applicant please state in what capacity.**

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 th utrh

Telephone number (if any) trhj but

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

Consent of premises licence holder to transfer

I/we PIRABA IYATHURAI  
[full name of premises licence holder(s)]

the premises licence holder of premises licence number LN/000000895/2011/7  
[insert premises licence number]

relating to

Food and wine 120 High Street Harrow Wealdstone HA3 7AL  
[name and address of premises to which the application relates]

hereby give my consent for the transfer of premises licence number

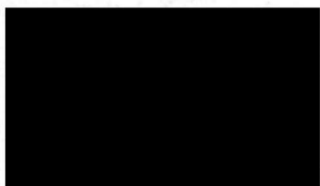
LN/000000895/2011/7  
[insert premises licence number]

to

SENNATHAMBY SRITHARAN  
[full name of transferee]

signed

name  
(please print)



PIRABA IYATHURAI

dated

06/04/2014