

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

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 **Tesco Stores Limited**

(Full names(s) of premises licence holder)

Being the premises licence holder, apply to vary a premises 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/000008218/2016/4

Part 1 - Premises details

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

HARROW SHAFTSBRY EXP (06023)

28-36 Shaftsbury Circ
SHAFTESBURY AVENUE

Post town

HARROW

Post code (if known)

HA2 0AT

Telephone number (if any)

Description of premises

Retail premises (supermarket) selling a range of goods and services. This includes the sale of alcohol for consumption off the premises and home delivery. Sales of alcohol for consumption off the premises are made from the supermarket sales floor.

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Part 2

Full name of proposed designated premises supervisor

MR NALLATHAMBY NAGULARAJ

Personal licence number of proposed designated premises supervisor and issuing authority.

Personal licence number: 06NN-00AQ-DDWW-RDYT

Issuing authority: London Borough of Harrow

Full name of existing designated premises supervisor (if any)

MR WILSON EGIDIO DIAS

Please tick

I would like this application to have immediate effect under section 38 of the Licensing Act 2003



I have enclosed the premises licence or relevant part of it

Yes

(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

• 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



• I will give a copy of this form to the existing premises supervisor, if any



• 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

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

Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant please state in what capacity.

Signature



Date

23.9.17.

Capacity

Licensing executive.

For joint applicants signature of 2nd applicant 2nd applicant's solicitor or other authorised agent. 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

Tesco Licensing Team
5 Falcon Way, Shire Park
Welwyn Garden City, Hertfordshire
AL7 1TW

Telephone number (if any): 01707913282

If you would prefer us to correspond with you by e-mail your e-mail address (optional): Licensing.team@uk.tesco.com

Full Name **NALLATHAMBY NAGULARAJ**



Of

Home Address



hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for varying a premises licence to specify an individual as designated premises supervisor under section 37 of the Licensing Act 2003 by Tesco Stores Ltd relating to a premises licence

Tesco Stores Ltd

for

Store Number: **6023**
Store Address: **28 SHAFTSBURY CIRCLE
SHAFTSBURY
HARROW
MIDDX - HA2 0AT**

and any premises licence to be granted or varied in respect of the application made by Tesco Stores Ltd concerning the supply of alcohol at the above premises

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below

Personal licence number

OGNN-00AQ-PDWU-RDYT

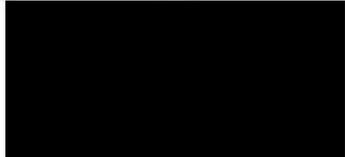
Personal Licence issuing authority

HARROW COUNCIL

Signed



Name (Please Print) **N. NAGULARAJ**



Date **25/9/17**