RECEIVED

2 2 OCT [Insert details including name and address of licensing authority and application representation of the services]

Time

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 HERMANIGINI THIRGHATAMapply to transfer the premises licence described (Insert name of applicant) below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below				
Premises licence number	6603629/2013/3			
Part 1 – Premises details				
Postal address of premises or, if none, ordnance survey SHANKAK & CO CASH & CARRY 231 233 NOVITHOUT KOAD SOUTH HARROW MIDDLESEX HAZ 8HN				
Post town SOUTH HEROW	Post code			
200 TH HIMES W	HAZ 8HN -			
Please give a brief description of the premises Off-licence Seveng confe and other food - ramed Soft.	chonory / Akcahol,			
Off-licence Seving confe and other food - ramed Soft.	chonory / Akahal,			
and other food - comed				
Off-licence Sewing confe and other food - ramad Soft. Name of current premises licence holder				
Off-licence Sewing confe and other food - ramed Soft. Name of current premises licence holder HELMANGINI THIA	SAKAJAH.			
Name of current premises licence holder HELMANGINI THINAGE Part 2 - Applicant details	SAKAJAH.			
Name of current premises licence holder HELMANGINI THINAGE Part 2 - Applicant details	to be transferred to you?			
Name of current premises licence holder HELMANGINI THIAG Part 2 - Applicant details In what capacity are you applying for the premises licence	to be transferred to you? Please tick * yes			

	c)	a recognised club		please complete section (B)			
(d)	a charity		please complete section (B)			
•	e)	the proprietor of an educational establishment		please complete section (B)			
1	f)	a health service body		please complete section (B)			
8	g)	an individual who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital	e 🗆	please complete section (B)			
i	h)	the chief officer of police of a police force in England and Wales		please complete section (B)			
. 4	*If you	 I am carrying on or proposing to carry on a b which involves the use of the premises for lie I am making the application pursuant to a 	usiness	Please tick yes			
	o statutory function or o a function discharged by virtue of Her Majesty's prerogative						
1	Mr	Mrs Miss	Ms	Other title (for example, Rev)			
	I am 18	s years old or over		Please tick ♥ yes			

SECOND INDIVIDU	JAL APPLICANT	(if applicable)		
Mr Surname	Mrs	Miss	Ms First names	Other title (for example, Rev)
I am 18 years old o	or over			Please tick yes
Current postal address if different from premises address				
Post Town			Postcode	
Daytime contact to	elephone numb	er		
E-mail address (optional)				
any registered nun	me and register mber. In the cas	e of a partnershi	plicant in full. Whe p or other joint ver ach party concerne	re appropriate please give nture (other than a body d.
Name			7 7 7	
Address				
Registered number	er (where applic	able)		
Description of app	plicant (for exan	nple partnership,	company, unincorpo	orated association etc)
Telephone numbe	er, if any			
E-mail (optional)				

Part 3

		Please tick	✓ Yes
Are you the holder of the premises licence under an interim author	rity notice?		U
Do you wish the transfer to have immediate effect?			U
If not when would you like the transfer to take effect?	D	. V	
	Day Month	n Year	
		Please tick	✓ Yes
I have enclosed the consent form signed by the existing premises li	icence holder		
If you have not enclosed the consent form referred to above plea What steps have you taken to try and obtain the consent?	se give the reaso	ons why not.	
What steps have you taken to try and obtain the consents			
		Please tick	√ Yes
If this application is granted I would be in a position to use the pre- application period for the licensable activity or activities authorised (see section 43 of the Licensing Act 2003)	mises during the d by the licence		
		Please tick	✓ Yes
I have enclosed the premises licence			
If you have not enclosed premises licence referred to above pleas	se give the reason	ns why not.	

I have made or enclosed payment of the fee — AMEANY TAKEN
 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 — Sevt
 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)

Date	Signature of	applicant or applicant's solicitor or other duly authorised agent (see guidance note 3) behalf of the applicant please state in what capacity.
Capacity For joint applications signature of 2 nd applicant or 2 nd 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		and the same supporting.
Capacity For joint applications signature of 2 nd applicant or 2 nd 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	0/10/13
agent (please read guidance note 4). If signing on behalf of the applicant please state in what capacity. Signature Date		
Date.	For joint appagent (please capacity.	lications signature of 2 nd applicant or 2 nd applicant's solicitor or other authorised read guidance note 4). If signing on behalf of the applicant please state in what
Date.		
	Signature	NIA.
Capacity	Date	
	Capacity	

Consent of premises licence holder to transfer

[full name	MANGINI THIA of premises licence holder(s)]			
the premises	licence holder of premises li	cence number LN (000003029 remises licence number	7/203
relating to				
Shankar [name and addre	& Co Cash & Carry ss of premises to which the applic	231 NO	RTHOLT ROA	D, DDLESEX
	y consent for the transfer of			N
LN 000	003029 2013 3			
to				
DUSHYAr	NTHAN SAMBAN	THAPILLAI		
,	*		1	
		*		
		<u></u>		
signed		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		1
name (please print)	HEMANGINI	THIAG ARATAH	•	1
dated	20/10/13			