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.

being th	ne premises liceno	ce holder, apply to vary a premises licence to spe	ci
(full na	me(s) of premises	licence holder)	
I / we	JOSEPH	MC CABE	

the individual named in this application as the premises supervisor under

section 37 of the Licensing Act 2003	
Premises licence number	
LN /000000 981 /2014	/11
Part 1 – Premises details	
Postal address of premises or, if none, ordnand description 320 NORTHOLT SOUTH HARROW	ROAD
Post town HARROW	Post code (if known) HA2 8EE
Telephone number (if any)	

Description of premises (please read guidance note 1)

PUBLIC HOUSE



Part 2

Full n	name of proposed designated premises supervisor
	JOSEPH MC CABE
Perso issuii	onal licence number of proposed designated premises supervisor and ng authority of that licence (if any)
C	185m-00AQ-YXJH-BMHQ
Full n	name of existing designated premises supervisor (if any)
	Please tick yes
I woul sectio	d like this application to have immediate effect under n 38 of the Licensing Act 2003
I have	enclosed the premises licence or relevant part of it
(If you reasor	have not enclosed the premises licence, or relevant part of it, please givens why not)
Reaso	ons why I have failed to enclose the premises licence or relevant part of
it	LICENCE IS ATTACHED TO PREMISES
	LICENCE APPLICATION CHANGE
	Plana tiak yan
	Please tick yes 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

Part 3 – 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 27/7/16
Capacity OWNER OF THE SHAWL BAR
For joint applicants signature of 2 authorised agent (please read guidance note 4). If signing on behalf of the applicant please state in what capacity.
Signature
Date
Capacity

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.
 Where there is more than one applicant, both applicants or their respective agents must sign the application form.
 This is the address which we shall use to correspond with you about this
- 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

I JOSEPH MC CABE
[full name of prospective premises supervisor]
of
[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
THE SHAWL BAR LICENCE LN/000000981/2014/11
by
SOSEPH MC CABE [name of applicant]
LN/000000981/2014/11 relating to a premises licence
[number of existing licence, if any]
for BAP
THE SHAWL BAR
320 NORTHOLT ROAD
SOUTA HARROW
HA2 8EE
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by
SOSEPH MC CARE [name of applicant]
concerning the supply of alcohol at
THE SHAWL BAR
320 NORTHOLT ROAD
SOUTH HARROW
HA2 SEE
[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
08JM-00AQ-YXJH-BMHQ [insert personal licence number, if any]
Personal licence issuing authority
HARROW 0208 736 6259 [insert name and address and telephone number of personal licence issuing authority, if any]
Signed
JOSEPH MC CABE
Name (please print)
27 / 7 / 16 Date