Harrow Application to vary a premises licence to specify an individual as designated premises supervisor Licensing Act 2003 For help contact licensing@harrow.gov.uk Telephone: 020 8901 2600

* required information

Section 1 of 4		
You can save the form at any t	ime and resume it later. You do not need to be	logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	GM/26508.1323	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
 Are you an agent acting on behalf of the applicant? Yes No 		Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Sainsbury's Supermarkets Limited	
* Family name	Sainsbury's Supermarkets Limited	
* E-mail	gmoore@wslaw.co.uk	
Main telephone number		Include country code.
Other telephone number		
Indicate here if the appli	icant would prefer not to be contacted by telep	hone
Is the applicant:		
 Applying as a business of Applying as an individual 	or organisation, including as a sole trader al	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
Is the applicant's business registered in the UK with Companies House?	Yes O No	Note: completing the Applicant Business section is optional in this form.
Registration number	03261722	
Business name	Sainsbury's Supermarkets Limited	If the applicant's business is registered, use its registered name.
VAT number -	660454836	Put "none" if the applicant is not registered for VAT.
Legal status	Public Limited Company	

Continued from previous page		
Applicant's position in the business	Store Manager	
Home country	United Kingdom	The country where the applicant's headquarters are.
Registered Address		Address registered with Companies House.
Building number or name	33	
Street	Holborn	
District		
City or town	London	
County or administrative area		
Postcode	EC1N 2HT	
Country	United Kingdom	
Agent Details		
* First name	Gary	
* Family name	Moore	
* E-mail	gmoore@wsalw.co.uk	
Main telephone number	020 7598 0358	Include country code.
Other telephone number		
Indicate here if you would	ld prefer not to be contacted by telephone	
Are you:		
• An agent that is a busine	ess or organisation, including a sole trader	A sole trader is a business owned by one person without any special legal structure.
 A private individual actir 	ng as an agent	porson without any special regarstracture.
Agent Business		
Is your business registered in the UK with Companies House?	Yes O No	Note: completing the Applicant Business section is optional in this form.
Registration number	OC334359	
Business name	Winckworth Sherwood LLP	If your business is registered, use its registered name.
VAT number -	N/A	Put "none" if you are not registered for VAT.
Legal status	Partnership	

Continued from previous page		
Your position in the business	Licensing Assistant	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Registered Address		Address registered with Companies House.
Building number or name	Minerva House	
Street	5 Montague Close	
District		
City or town	London	
County or administrative area		
Postcode	SE1 9BB	
Country	United Kingdom	
Section 2 of 4		
PREMISES DETAILS		
I/we apply to vary a premises li section 37 of the Licensing Act	cence to specify the individual named in this ap 2003.	oplication as the premises supervisor under
* Premises licence number	LN/00003821/2017/17	
Are you able to provide a posta	al address, OS map reference or description of t	he premises?
Address	p reference O Description	
Address		
* Building number or name	Sainsbury's Unit 1 Alder Brook	
* Street	14-20 High Street	
District	Wealdstone	
* City or town	Harrow	
County or administrative area	Middlesex	
Postcode	HA3 7HA	
* Country	United Kingdom	
Contact Details		
E-mail		
Telephone number		
Other telephone number		
Describe the premises. For exa	mple, what type of premises it is	

Continued from previous page		
A Supermarket.		
Section 3 of 4		
SUPERVISOR		
Full Name Of Proposed Desi	gnated Premises Supervisor	
* First name	Тгасеу	
* Family name	Wright	
	dd mm yyyy	
Personal licence number of		
proposed designated	223518754	
premises supervisor		
Issuing authority of that licence	Brent, London Borough Council	
Full Name Of Existing Design	nated Premises Supervisor	
First name	Wahid	
Family name	Akhtar	
* Would you like this applicati the Licensing Act 2003?	on to have immediate effect under section 38 of	The premises licence holder can continue the supply of alcohol if, for example, the existing premises supervisor is suddenly
• Yes	⊖ No	indisposed or unable to work.
☑ I will notify the existin	g premises supervisor (if any) of this application	It is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application.
* Will the premises licence or r application?	relevant part of it be submitted with this	
• Yes	⊖ No	
How will the consent form of the supplied to the authority?	the proposed designated premises supervisor	
C Electronically, by the pro	posed designated premises supervisor	
• As an attachment to this	variation	

Continued from previous page	Reference number for consent
If the consent form is already s the proposed designated prer supervisor for its 'system refer reference'	nises
Section 4 of 4	
PAYMENT DETAILS	
This fee must be paid to the au This formality requires a fixed	uthority. If you complete the application online, you must pay it by debit or credit card. fee of £23
DECLARATION	
statement in or in connection	
STATEMENT IN OR IN CONNE SUMMARY CONVICTION TO IN A PARTNERSHIP WHICH IS * PARTNERSHIPS] IT IS AN OFF	IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE ECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON A FINE OF ANY AMOUNT. [APPLICABLE TO INDIVIDUAL APPLICANTS ONLY, INCLUDING THOSE NOT A LIMITED LIABILITY PARTNERSHIP, BUT NOT COMPANIES OR LIMITED LIABILITY ENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971] FOR A PERSON TO WORK WHEN ONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF
THEIR IMMIGRATION STATUS TO EMPLOYMENT WILL BE LI NATIONALITY ACT 2006 AND	S. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS ABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND D, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE EDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.
Icking this box indica	tes you have read and understood the above declaration
This section should be comple behalf of the applicant?"	eted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	Winckworth Sherwood LLP
* Capacity	Agent
* Date	
	dd mm yyyy
	Remove this signatory
Full name	
Capacity	
* Date	
	dd mm yyyy
	Remove this signatory
	Add another signatory

OFFICE USE ONLY

Applicant reference number	GM/26508.1323	
Fee paid		
Payment provider reference		
ELMS Payment Reference		
Payment status		
Payment authorisation code		
Payment authorisation date		
Date and time submitted		
Approval deadline		
Error message		
Is Digitally signed		
1 <u>2 3 4</u>	Next >	

CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS PREMISES SUPERVISOR

I TRACEY WRIGHT

of

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for variation by Sainsbury's Supermarkets Ltd relating to a premises licence (nc LN/000003821/2017/17) for

Unit 1 Alder Brook

14-20 High Street

Wealdstone

Harrow

Middlesex

HA3 7HA

and any premises licence to be granted or varied in respect of this application made by Sainsbury's Supermarkets Ltd concerning the supply of alcohol at

Unit 1 Alder Brook

14-20 High Street

Wealdstone

Harrow

Middlesex

HA3 7HA

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 No: 223518754

Personal Licence Issuing Authority: Brent, London Borough Council

Signed:	
Name:	TRACEY WRIGHT
Dated:	20/12/2018