

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 **PREZZO PLC**

(full name(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/000000666/2011/6

Part 1 - Premises details

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

67-69 The Broadway
Stanmore
Middx
HA7 4DJ



Telephone number (if any)



Description of premises (please read guidance note 1)

Restaurant

Part 2

Full name of proposed designated premises supervisor

Monika Szaboova

Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)

1573/1

New Forest D C

Full name of existing designated premises supervisor (if any)

Gani Qufaj - 21/05/14

Please tick yes

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

(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 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

21/05/2014

Capacity

Administration

For joint applicants signature of 2nd applicant 2nd 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)

Prezzo Plc
Johnston House
8 Johnston Road

Post Town

Woodford Green

Post Code

IG8 0XA

Telephone number (if any)



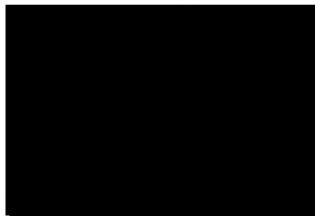
If you would

you by e-mail your e-mail address (optional)

Consent of individual to being specified as premises supervisor

I Monika Szaboova
(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 supervisor in relation to the application for

Change of DPS
(type of application)

by

Prezzo Plc
(name of applicant)

relating to a premises licence

LN/000000666/2011/6
(number of existing licence , if any)

for

67-69 The Broadway
Stanmore
Middx
HA7 4DJ

(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

Prezzo Plc

(name of applicant)

concerning the supply of alcohol at

67-69 The Broadway
Stanmore
Middx
HA7 4DJ

(name and address of premises to which the 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

1573/1

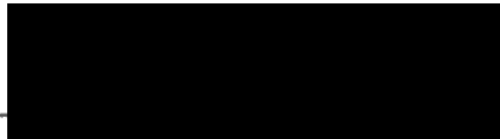
(insert personal licence number, if any)

Personal Licence issuing authority

New Forest D C

(insert name address and telephone number of personal licence issuing authority, if any)

Signature



Name (please print)

Monika Szaboova

Date

19.07.2014