NON BORG IGH OF HARPOL
( 2 4 OCT 2014 ))
COMMUNITY SAFETY SERVICE

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** 

0605-HWTP-WEQG-N7QW

Part 1 - Premises details

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

36-38 High Street Pinner Middx HA5 5PW

Telephone number (if any)

Description of premises (please read guidance note 1)

Restaurant

## Part 2

## Full name of proposed designated premises supervisor Maria Perez Del Hierro

Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any) 01365 **Ealing Council** 

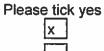
Full name of existing	designated	premises	supervisor (if any)	
Mehdi Gashi	- 14/10/14			

	Please tick yes		
I would like this application to have immediate effect under section 38 of the Licensing Act 2003	x		
I have enclosed the premises licence or relevant part of it	x		
(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			

•	I have made or enclosed payment of the fee	x
•	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	x
•	I have enclosed the premises licence, or relevant part of it or explanation	x
•	I will give a copy of this form to the existing premises supervisor, if any	x
0	I understand that if I do not comply with the above requirements my	x

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	14/10/14	
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

Date Capacity Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5) Prezzo Plc	Signature		
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)	Date		
associated with this application (please read guidance note 5)	Capacity		
		th this application (ple	
Post Town Post Code	Post Town		Post Code
Telephone number (if any)	Telephone nu	mber (if any)	

## Consent of individual to being specified as premises supervisor

7

J	Maria Perez Del Hierro		
	(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 superviso relation to the application for			
	Change of DPS		
by	(type of application)		
•			
	Prezzo Pic		
rel	(name of applicant) ating to a premises licence 0605-HWTP-WEQG-N7QW		
	(number of existing licence, if any)		
for	36-38 High Street Pinner Middx HA5 5PW		

(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

concerning the supply of alcohol at

(name of applicant)

36-38 High Street Pinner Middx HA5 5PW

(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

01365

(insert personal licence number, if any)

Personal Licence issuing authority

Ealing Council

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

Signature			
Name (please pri	nt) Maria Perez Del Hierro		,
Date	20/10/2014.	à is. <del></del>	