

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.

#We HANSA PATEL AND RAMESH PATEL

*(Insert name of applicant)*

apply to transfer the premises licence described below under section 42 of the  
Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

LN/000000939/2017/4

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description Trading as: THE GRAPEVINE QUALITY WINE MERCHANTS GROUND FLOOR SHOP 12 COLLEGE HILL ROAD HARROW	
Post town HARROW	Post code HA3 7HH
Telephone number at premises (if any) 020 8954 0782	

Please give a brief description of the premises GROUND FLOOR SHOP NAMELY THE GRAPEVINE QUALITY WINE MERCHANTS
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Name of current premises licence holder MS KIRAN HARKISHAN PARMAR
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Part 2 - Applicant details

In what capacity are you applying for the premises licence to be transferred to you?

- |   | Please tick yes   |
|---|---|
| a) an individual or individuals*                | <input checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual *          |   |
| i. as a limited company                         | <input type="checkbox"/> please complete section (B)            |
| ii. as a partnership                            | <input type="checkbox"/> please complete section (B)            |
| iii. as an unincorporated association or        | <input type="checkbox"/> please complete section (B)            |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> please complete section (B)            |
| c) a recognised club                            | <input type="checkbox"/> please complete section (B)            |

- d) a charity  please complete section (B)
- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) an individual who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\*If you are applying as a person described in (a) or (b) please confirm:

**Please tick yes**

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

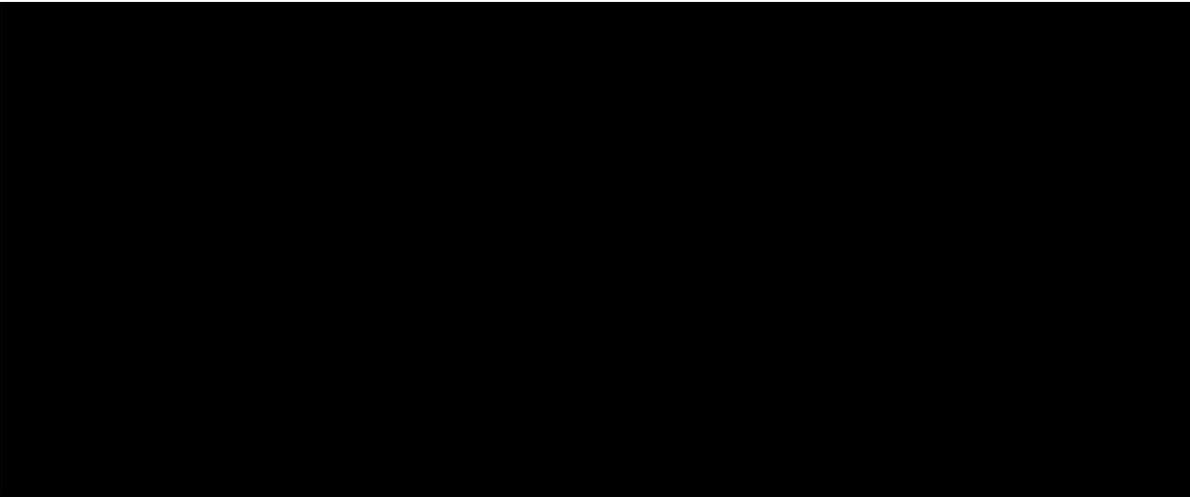
Mr  Mrs  Miss  Ms  Other title   
(for example, Rev)

**Surname**

PATEL

**First names**

RAMESH



E-mail address  
(optional)

[Redacted]

**SECOND INDIVIDUAL APPLICANT** (fill in as applicable)

Mr  Mrs  Miss  Ms  Other title   
(for example, Rev)

**Surname**

**First names**

I am 18 years old or over

Please tick yes

[Redacted]

**(B) OTHER APPLICANTS**

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)



If you have not enclosed premises licence referred to above please give the reasons why not.

- I have made or enclosed payment of the fee
- 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
- 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)

**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  
 .....X.....X  
 Ramesh Patel

Date  
 .....

Capacity  
 .....JOINT APPLICANT.....

**For joint applicants signature of 2<sup>nd</sup> applicant, 2<sup>nd</sup> 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  
 .....X.....X  
 Hansa Patel

Date  
 .....

Capacity  
 .....JOINT APPLICANT.....

<b>Contact name (where not previously given) and postal address for correspondence associated with this application</b> (please read guidance note 5) WALTER WILSON RICHMOND SOLICITORS 360B STATION ROAD HARROW MIDDLESEX	
<b>Post town</b> HARROW	<b>Post Code</b> HA1 2DE
<b>Telephone number (if any)</b> 0208 427 8484	
<b>If you would prefer us to correspond with you by e-mail your e-mail address (optional)</b> reception@walterwilson.co.uk	

- I have made or enclosed payment of the fee
- I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed
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**Part 4 – 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  .....X  
 Ramesh Patel .....X

Date 8/09/17 .....

Capacity (JOINT APPLICANT) .....

**For joint applicants signature of 2<sup>nd</sup> applicant, 2<sup>nd</sup> 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  .....X  
 Hansa Patel .....X

Date 8/09/17 .....

Capacity (JOINT APPLICANT) .....

**Contact name (where not previously given) and postal address for correspondence associated with this application** (please read guidance note 5)  
 WALTER WILSON RICHMOND SOLICITORS  
 360B STATION ROAD  
 HARROW  
 MIDDLESEX

<b>Post town</b> HARROW	<b>Post Code</b> HA1 2DE
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**Telephone number (if any)** 0208 427 8484

**If you would prefer us to correspond with you by e-mail your e-mail address (optional)** reception@walterwilson.co.uk

### **Notes for Guidance**

1. Describe the premises. For example the type of premises it is, its general situation and layout and any other information which would be relevant to the licensing objectives.
2. The application form must be signed.
3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
5. This is the address which we shall use to correspond with you about this application.

Consent of premises licence holder to transfer

I/we KIRAN HARKISHAN PARMAR  
[full name of premises licence holder(s)]

the premises licence holder of premises licence number LN/000000939  
[insert premises licence number]

relating to THE GRAPENINE (WINE MERCHANTS)  
12 COLLEGE HILL ROAD, HA3 7HH  
[name and address of premises to which the application relates]

hereby give my consent for the transfer of premises licence number

LN/000000939  
[insert premises licence number]

to

MR RAMESH PATEL AND MRS HANSA PATEL  
[full name of transferee]

signed  
name  
(please print)



MRS KIRAN HARKISHAN PARMAR

dated

28/07/2017.