



* required information

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You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference	<input type="text" value="Not Currently In Use"/>	This is the unique reference for this application generated by the system.
Your reference	<input type="text" value="Miller & Carter Harrow - TP"/>	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?	<input checked="" type="radio"/> Yes <input type="radio"/> 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	<input type="text" value="Mitchells & Butlers Leisure Retail Ltd"/>	
* Family name	<input type="text" value="Mitchells & Butlers Leisure Retail Ltd"/>	
* E-mail	<input type="text" value="[REDACTED]"/>	
Main telephone number	<input type="text" value="[REDACTED]"/>	Include country code.
Other telephone number	<input type="text"/>	
<input type="checkbox"/> Indicate here if the applicant would prefer not to be contacted by telephone		

Is the applicant:

<input checked="" type="radio"/> Applying as a business or organisation, including as a sole trader	A sole trader is a business owned by one person without any special legal structure.
<input type="radio"/> Applying as an individual	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?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
* Registration number	<input type="text" value="01001181"/>	
* Business name	<input type="text" value="Mitchells & Butlers Leisure Retail Ltd"/>	If the applicant's business is registered, use its registered name.
* VAT number	<input type="text" value="GB"/> <input type="text" value="4551498"/>	Put "none" if the applicant is not registered for VAT.
* Legal status	<input type="text" value="Private Limited Company"/>	

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* Applicant's position in the business

Premises Licence Holder

Home country

United Kingdom

The country where the applicant's headquarters are.

Registered Address

Address registered with Companies House.

* Building number or name

* Street

District

* City or town

County or administrative area

* Postcode

* Country

Agent Details

* First name

* Family name

* E-mail

Main telephone number

Other telephone number

Include country code.

Indicate here if you would prefer not to be contacted by telephone

Are you:

An agent that is a business or organisation, including a sole trader

A sole trader is a business owned by one person without any special legal structure.

A private individual acting as an agent

Agent Business

* Is your business registered in the UK with Companies House?

Yes No

* Is your business registered outside the UK?

Yes No

* Business name

Mitchells & Butlers Leisure Retail Ltd

If your business is registered, use its registered name.

* VAT number

GB

610752862

Put "none" if you are not registered for VAT.

* Legal status

Partnership

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* Your position in the business

Home country

Agent Business Address

* Building number or name

* Street

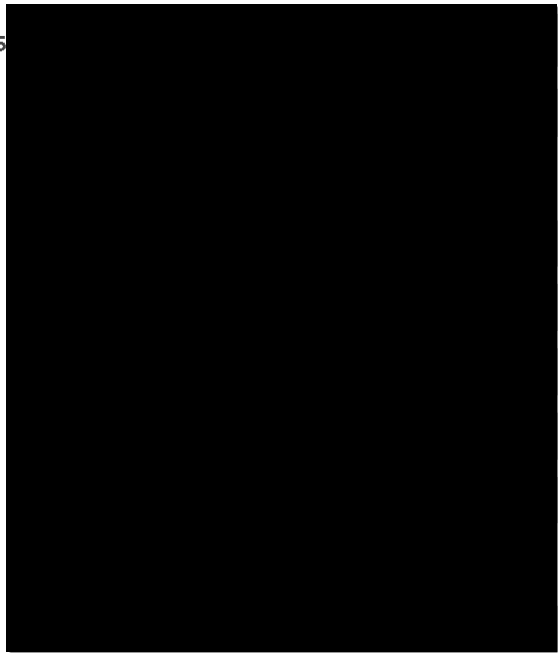
District

* City or town

County or administrative area

* Postcode

* Country



The country where the headquarters of your business is located.

If you have one, this should be your official address - that is an address required of you by law for receiving communications.

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PREMISES DETAILS

I/we 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

Are you able to provide a postal address, OS map reference or description of the premises?

Address OS map reference Description

Address

* Building number or name

* Street

District

* City or town

County or administrative area

Postcode

* Country

Contact Details

E-mail

Telephone number

Other telephone number

Describe the premises. For example, what type of premises it is

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As Existing

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SUPERVISOR

Full Name Of Proposed Designated Premises Supervisor

* First name

* Family name

Personal licence number of proposed designated premises supervisor

Issuing authority of that licence

Full Name Of Existing Designated Premises Supervisor

First name

Family name

* Would you like this application to have immediate effect under section 38 of the Licensing Act 2003?

Yes No

* Will the premises licence or relevant part of it be submitted with this application?

Yes No

* Reasons why the premises licence or relevant part of it will not be submitted with this application

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

Electronically, by the proposed designated premises supervisor
 As an attachment to this variation

Reference number for consent form (if known)

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'

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PAYMENT DETAILS

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This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

This formality requires a fixed fee of £23

DECLARATION

I/we understand 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.

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name

* Capacity

* Date / /
dd mm yyyy

OFFICE USE ONLY

Applicant reference number

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

< Previous 1 2 3 4 Next >

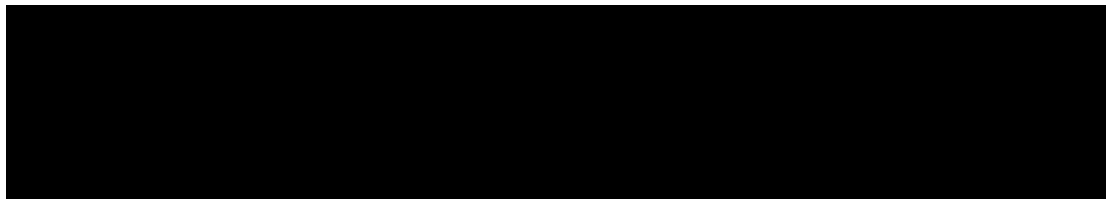
MITCHELLS AND BUTLER LEISURE RETAIL LIMITED

CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS DESIGNATED PREMISES SUPERVISOR

To be completed in block capitals

I (Insert Full Name)

LUKASZ MICHAL OSTASZEWSKI



hereby confirm that I give my consent to be specified as the Designated Premises Supervisor in relation to the application for a Variation of the Premises Licence by Mitchells and Butler Leisure Retail Limited relating to a Premises Licence (Insert

Premises Licence Number) LN/000000694/14

(Insert Name and Address of Premises) MILLER & CARTER, LEEFE ROBINSON, 76 UXBRIDGE ROAD, HARROW WEALD, HARROW HA3 6DL

and any licence to be granted or varied in respect of this application made by

Mitchells Butlers Leisure Retail Limited, concerning the supply of alcohol at

(Insert Name and Address of Premises)

MILLER & CARTER, LEEFE ROBINSON, 76 UXBRIDGE ROAD, HARROW WEALD, HARROW, HA3 6DL

also confirm that I currently hold a personal licence, details of which I set out below:

Personal Licence Number LP 700 2338

Personal Licence Issuing Authority READING BOROUGH COUNCIL



Name Printed OSTASZEWSKI LUKASZ

Dated 27/02/2016

Once completed, please send this document to Poppleston Allen Licensing Solicitors:-

Poppleston Allen Licensing Solicitors
37 Stoney Street, The Lace Market,
Nottingham, NG1 1LS