

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	time and resume it later. You do not need to be	e 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	LIC/LAF/M&S	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 be	ehalf of the applicant?	Put "no" if you are applying on your own
	No	behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Marks & Spencer plc	
* Family name	As above	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if the appl	licant would prefer not to be contacted by tele	phone
Is the applicant:		
 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.
Applying as an individu	al	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 ← No	Note: completing the Applicant Business section is optional in this form.
Registration number	00214436	
Business name	Marks & Spencer plc	If the applicant's business is registered, use its registered name.
VAT number -	N/A	Put "none" if the applicant is not registered for VAT.
Legal status	Private Limited Company	G 6 MAR 2017

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Applicant's position in the business	Owners/Occupiers]
Home country	United Kingdom	The country where the applicant's headquarters are.
Registered Address		Address registered with Companies House.
Building number or name	Waterside House	
Street	35 North Wharf Road	
District		
City or town	London	
County or administrative area		
Postcode	W2 1NW	
Country	United Kingdom	
Agent Details		
* First name	Lesley	
* Family name	Foy	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if you wou	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 acti	ng as an agent	person without any special legal structure.
Agent Business		
Is your business registered in the UK with Companies House?		Note: completing the Applicant Business section is optional in this form.
Registration number	OC392078	
Business name	Blake Morgan 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	

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Your position in the business	Licensing Information Officer	
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	New Kings Court	
Street	Tollgate	
District	Chandlers Ford	
City or town	Eastleigh	
County or administrative area	Hants	
Postcode	SO53 3LG	
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/000000718/2017/12	
Are you able to provide a posta	al address, OS map reference or description of t	he premises?
	p reference C Description	
Address		
* Building number or name	Marks & Spencer	
* Street	31 St Anns Road	
District		
* City or town	Harrow	
County or administrative area	Middlesex	
Postcode	HA1 1NB	
* Country	United Kingdom	
Contact Details		
E-mail		
Telephone number		
Other telephone number		
Describe the premises. For exa	mple, what type of premises it is	

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Store with licensed facilities		
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SUPERVISOR		
Full Name Of Proposed Design	gnated Premises Supervisor	
* First name	Teresa	
* Family name	Naughton	
Personal licence number of		
proposed designated premises supervisor	170791	
Issuing authority of that licence	London Borough of Brent	
Full Name Of Existing Design	nated Premises Supervisor	
First name	Sean	
Family name	McNally	
* Would you like this application the Licensing Act 2003?	on to have immediate effect under section 38 of	•
Yes	← No	
* Will the premises licence or rapplication?	elevant part of it be submitted with this	
Yes	← No	
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		
		If the consent form is already submitted, ask
Reference number for consent form (if known)		the proposed designated premises supervisor for its 'system reference' or 'your reference'
Section 4 of 4	-	
PAYMENT DETAILS		
This fee must be paid to the au	uthority. If you complete the application online,	you must pay it by debit or credit card.
This formality requires a fixed	fee of £23	
DECLARATION		
	nce, liable on conviction to a fine up to level 5 or false statement in or in connection with this ap	

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☐ 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	Blake Morgan LLP		
* Capacity	Solicitor Agents		
* Date	06 / 03 / 2017 dd mm yyyy		
	Remove this signatory		
	Add another signatory		
OFFICE USE ONLY			
Applicant reference number	LIC/LAF/M&S		
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			
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New DPS Consent Form England and Wales

The role of the DPS ideally needs to be held by the Store Manager (or Food Commercial Manager in Premier & Major Stores)

Consent of Individual to be specified as Designated Premises Supervisor
Full name of Designated Premises Supervisor: TERESO PLOYERS
Address of Designated Premises Supervisor:
I hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the
application for:
VARIATION OF THE PREMISES LICENCE TO CHANGE THE DESIGNATED PREMISES SUPERVISOR BY MARKS & SPENCER PLC / MARKS & SPENCER SIMPLY FOODS LTD Relating to a Premises Licence for:
[insert name and address of premises to which the application relates together with the Premises Licence number] Notes + Spencer, 31 51- Anns Road, Herriera, HAI INB (LN 100000718 (2017 (12)
And any premises licence to be granted or varied in respect of this application made by MARKS & SPENCER PLC / MARKS & SPENCER SIMPLY-FOODS-LTD concerning the supply of alcohol at:-
Marks & Spencer, 31 St AMS Road, Harrow, HAI INB
[insert 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
Name of Issuing Authority Landon Baraugh of Brant
Signed
Full name (please print). Teresci I dery Ann Derughteon
Date 3.3.2017