

Harrow

Application to vary a premises licence to specify an individual as designated premises supervisor Licensing Act 2003

For help contact

<u>licensing@harrow.gov.uk</u> Telephone: 020 8901 2600

* required information

C1: 4 - 5 4		
Section 1 of 4		
You can save the form at any t	time and resume it later. You do not need to	be 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	JG&P - LK	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
• Yes O	No	behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Marks and Spencer Plc	
* Family name		
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if the appl	icant would prefer not to be contacted by te	lephone
Is the applicant:		
Applying as a business of Applying as an individual	or organisation, including as a sole trader al	A sole trader is a business owned by one person without any special legal structure. 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?	YesNo	Note: completing the Applicant Business section is optional in this form.
Registration number	00214436	
Business name	Marks and 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	

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Applicant's position in the business	Owners/Operators	
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		
* Family name		
* 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
A private individual actir	ng as an agent	person without any special legal structure.
Agent Business		
Is your business registered in the UK with Companies House?	○ Yes	Note: completing the Applicant Business section is optional in this form.
Is your business registered outside the UK?	○ Yes	
Business name	John Gaunt & Partners	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 Support Manager	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Business Address		If you have one, this should be your official
Building number or name	Units 39-41 Haslar Marine Technology Park	address - that is an address required of you by law for receiving communications.
Street	Haslar Road	
District		
City or town	Gosport	
County or administrative area		
Postcode	PO12 2AG	
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 a 2003.	pplication as the premises supervisor under
* Premises licence number	LN/00000717/2017/11	
Are you able to provide a posta	al address, OS map reference or description of	the premises?
AddressOS ma	p reference O Description	
Address		
* Building number or name	Marks and Spencer	
* Street	4 Bishops Walk	
District		
* City or town	Pinner	
County or administrative area	Middlesex	
Postcode	HA5 5QQ	
* Country	United Kingdom	
Contact Details		
E-mail		
Telephone number	020 8868 3815	
Other telephone number		
Describe the premises. For exa	mple, what type of premises it is	

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Store with licensed facilities		
Section 3 of 4		
SUPERVISOR		
Full Name Of Proposed Desi	gnated Premises Supervisor	
* First name	Claudette Francoise	
* Family name	Blair	
Personal licence number of		
proposed designated premises supervisor	00607	
Issuing authority of that licence	London Borough of Ealing	
Full Name Of Existing Design	nated Premises Sunervisor	
First name	Afrim	
Family name	Imeri	The promises licence holder can continue
* Would you like this application the Licensing Act 2003?	on to have immediate effect under section 38 of	The premises licence holder can continue the supply of alcohol if, for example, the
Yes	○ No	existing premises supervisor is suddenly indisposed or unable to work.
		·
□ I will notify the existing	g premises supervisor (if any) of this application	It is sufficient for the licensee to inform the existing premises supervisor in writing,
		without sharing the specific details of the
* Will the premises licence or	relevant part of it be submitted with this	application.
application?	cievant part of it be submitted with this	
Yes	No	
* Reasons why the premises li	cence or relevant part of it will not be submitted v	with this application
The original Premises Licence	will be sent by post, as there is no facility to uploa	ad a copy.

Continued from previous page		
How will the consent form of the supplied to the authority?	ne proposed designated premises supervisor	
 Electronically, by the proj 	oosed 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'
Section 4 of 4		
PAYMENT DETAILS		
·	thority. If you complete the application online,	you must pay it by debit or credit card.
This formality requires a fixed f	ee of £23	
DECLARATION		
 I/we understand it is an offen statement in or in connection 	ce, liable on conviction to a fine under section a with this application.	158 of the licensing act 2003, to make a false
STATEMENT IN OR IN CONNECTION TO A SUMMARY CONVICTION TO A IN A PARTNERSHIP WHICH IS PARTNERSHIPS] IT IS AN OFFET THEY KNOW, OR HAVE REASO THEIR IMMIGRATION STATUS TO EMPLOYMENT WILL BE LIANATIONALITY ACT 2006 AND THEY DO SO IN THE KNOWLE	S AN OFFENCE, UNDER SECTION 158 OF THE LIC CTION WITH THIS APPLICATION. THOSE WHO M IS FINE OF ANY AMOUNT. [APPLICABLE TO INDIVINOT A LIMITED LIABILITY PARTNERSHIP, BUT NOT THE IMMIGRATION PROBLE CAUSE TO BELIEVE, THAT THEY ARE DISTANDED TO A CIVIL PENALTY UNDER SECTION 15 CO., PURSUANT TO SECTION 21 OF THE SAME ACT, DGE, OR WITH REASONABLE CAUSE TO BELIEVE SES YOU have read and understood the above designed the second of the second	MAKE A FALSE STATEMENT MAY BE LIABLE ON MIDUAL APPLICANTS ONLY, INCLUDING THOSE OT COMPANIES OR LIMITED LIABILITY ON ACT 1971] FOR A PERSON TO WORK WHEN EQUALIFIED FROM DOING SO BY REASON OF AVE OR WHO IS SUBJECT TO CONDITIONS AS OF THE IMMIGRATION, ASYLUM AND WILL BE COMMITTING AN OFFENCE WHERE E, THAT THE EMPLOYEE IS DISQUALIFIED.
This section should be completed behalf of the applicant?"	ted by the applicant, unless you answered "Yes	" to the question "Are you an agent acting on
* Full name	John Gaunt & Partners	
* Capacity	Solicitors for the applicant	
* Date	22 / 01 / 2019 dd mm yyyy Remove this signatory	
Full name		
Capacity		
,		I
* Date	dd mm yyyy	
	Remove this signatory	

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	Add another signatory	
OFFICE USE ONLY		
Applicant reference number	JG&P - LK	
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		
1 <u>2</u> <u>3</u> <u>4</u>	Next >	

New DPS Consent Form England and Wales

odisent of individual to be specified as premises supervisor	
Full name (including title) of Prospective Premises Supervisor.	
Miss Claudette Françoise Blair	
Address of Prospective Promises Communication	
hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application	
VARIATION OF THE PROPERTY OF T	
VARIATION OF THE PREMISES LICENCE TO CHANGE THE DESIGNATED PREMISES SUPERVISOR	
ву	
MARKS & SPENCER PLC / MARKS & SPENCER SIMPLY FOODS LTD	
Relating to a Premises Licence for	
Marka & Spencer	
4, Bishops Walk,	
Pinner, Middlesex.	
HA5 500	
PREMISES LICENCE NUMBER-LN/000000717/2017/11	
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.	
4, Bishops Walk, Pinner, Middlesex, HA5 5QQ	
I also confirm that I am entitled to work in the United Kingdom and 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 Muino-Authority Filing Council	
Signed	
Full name (please print)Claudette Blair	

Job title	