Application to vary a premises licence to specify an individual as designated premises supervisor 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.

1/we barry Willy	
(full name(s) of premises licence holder)	***************************************
being the premises licence holder, apply to vary a p	remises licence to
specify the individual named in this application as ti	-
supervisor under section 37 of the Licensing Act 20	03
Premises licence number	
IN10000007061201019	
ANTO- COLUMN	
Part 1 – Premises details	
Postal address of premises or, if none, ordnance su	rvey map reference
or description	
7 Warrigh Parade Belmost Circle	
Kenton	
Post town	Post code (if
Kenton	known) MA3 884
Telephone number (if any)	
	<u>-</u> .

Description of premises (please read guidance note 1)

Life of bally Prelatic House.

RECEIVED AT LICENSING OFFICE

1 O JUN 2013

TIME.

Full name of proposed designated premises supervisor	
Michelle Moloney	
, 1010101000	\Box
Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)	
153494	
Full name of existing designated premises supervisor (if any)	
Please tick yes	.
	.
I would like this application to have immediate effect under section 38 of the Licensing Act 2003	
I have enclosed the premises licence or relevant part of it	
(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	
Please tick yes	S,
■ I have made or enclosed payment of the fee	
 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 ■ I have enclosed the premises licence, or relevant part of it or ✓	7
explanation I will give a copy of this form to the existing premises supervisor, if any]
 I understand that if I do not comply with the above requirements my application will be rejected 	1

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 agent (See guidance note 3). If signin state in what capacity.	
Signature	
•••••	
Date	2013
*******	A
Capacity Owner and	applicant.
•••••	(•
For joint applicants signature of 2 nd other authorised agent (please read of the applicant please state in what	juidance note 4). If signing on behalf
Signature	
*********	••••••
Date	
•••••	
Capacity	

Contact name (where not previously correspondence associated with this note 5)	
Post town	Post Code
Telephone number (if any)	
If you would prefer us to correspond address (optional)	with you by e-mail your e-mail

Consent of individual to being specified as premises supervisor

Michelle MOLONEY
[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 designate
premises supervisor in relation to the application for
[type of application]
by O
Barry Reily
France of Africance 2
relating to a premises LIFE OF REILLY
[number of existing licence, if any]
for Y WARWICK PARADE
BELMONT CIRCLE
HA3 85A.
[name and address of premises to which the application relates]

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Frence [iname of applicant]	ly_	Onno	N O	ud	appli	icut i	<u> </u>
concerning the supply of Life of Nilly Venton Nieddlesen	of alcohol a	at			ų r		
[name and address of	nramicae	to which a	nnlicofin	n reiel			
I also confirm that I ar personal licence, details	n applying	for, inter	nd to ap		-	ently h	old a
Personal licence number	ər						
1531	+94	_					
[insert personal licence	number, i	f any]					,
Personal licence issuin	g authority	,					
[insert name and address authority, if any]	N B∞ ess and te	SECU elephone r	och number (of pers	F ∳ sonal lice	Ren ence is:	Suing
Signed							
Name (please print)	mch	velle	We	ù⊢0	NC	1	
Date	١٥- ١	6 - L3	3				