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.
(full name(s) of premises licence holder)	
being the premises licence holder, apply to vary a premis	
the individual named in this application as the premises:	supervisor under
section 37 of the Licensing Act 2003	
Premises licence number	
0509-7RH4-4E7B-EPAR	
Part 1 – Premises details	
Postal address of premises or, if none, ordnance survey	map reterence or
description Lindal Hotel	
2 Hindes Road	
Z mildes Road	
Post town	Post code (if known)
Harrow	HA1 1SJ
Description of premises (please read guidance note 1)	
Public House	



TIME

Part 2

Full name of proposed designated premises supervisor Hannington Paul Nzoka	
Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any) 144632- Manchester City Council	_
Full name of existing designated premises supervisor (if any) Jay Rowland	
ouy Normana	
Please tick y	/es
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	f it
Please tick y	/es
•	<u> </u>
 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 	X X X
 I have enclosed the premises licence, or relevant part of it or explanation I will give a copy of this form to the existing premises supervisor, if any 	

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 solicitor or other duly authorised agent (See guidance note 3). If signing on behalf of the applicant please state in what capacity.

Date 5 June 2013	
Capacity Soliciter acting as agent not and on behalf of appulant number personal habiting	m
For joint applicants signature of 2 nd applicant 2 nd 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	
Date	
Capacity	

CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS PREMISES SUPERVISOR

(full name of prospective premises supervisor) Pote of Right	
full name of prospective premises supervisor) Date of Birth: Place of Birth:	
of: (home address of prospective premises supervisor)	
hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the Application to Vary the Premises Licence to Specify the Designated Premises Supervisor	
Supervisor CONVIVIA MANAGEMENT SERVICES UTD	
relating to a premises licence: DS09-72H14-4E78-EPAL (number of existing licence, If any)	
for: 2 HNDES ROAD HARROW HAI IST (name and address of premises to which the application relates)	
and any premises licence to be granted or varied in respect of this application made by	
(name of applicant)	
LINDAZ 15076Z	<u>.</u>
concerning the supply of alcohol at: 2 HNDES 1000 HARNOW HAT IS.	,
l 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: 44632 (insert personal, licence number, if any) (Control of the control of th	
Personal licence issuing authority: MAN CHESTER CITY WWW CHESTER	_
Signed:	
Name (please print): HAJJIN AIDA PARL WOORS Contact No: 07824557810	
Date:	



Issued by: Expires: Personal Licence **Licensing Act 2003**

No: 144632

Address:

Hannington Paul

Name:

Nzoka

Manchester City Council 29/07/2022

MANCHESTER COUNCIL

Manchester City Council, Licensing Business Unit PO Box 271, Manchester, M18 8YU Telephone: +44 (0)161 234 5004 premises.licensing@manchester.gov.uk If found please return to: