

The Cheif Licensing Officer London Borough of Harrow Environmental Health Services

PO Box 18
Civic Centre,
Station Road
Harrow, Middlesex
HA1 2UT

RECEIVED 2 6 NOV 2014

Lidl UK GmbH
Licensing Department
Locking Castle Business Park
West Wick
Weston-Super-Mare
BS24 7TG

Telephone: Email:

25 November 2014

Dear Sir/ Madam

Licensing Act 2003 - Change of Designated Premises Supervisor Lid UK GmbH, 80-82 The Broadway, , Stanmore, Middlesex, HA7 4DU Premises Licence Number: LN/000000696/2014/4

Please find enclosed the following documents in connection with the above application to change the DPS at our premises:

- 1. Application Form
- 2. Signed Consent Form
- 3. Cheque for £23.00
- 4. Current Premises Licence

The application has been copied to the Police Licensing Officer, as per the details below, and to the existing DPS.

It would be apprecaited if the updated licence could be returned to the address above rather than the premises or registered company address.

Yours sincerely

Licensing Department

Copied to:

Police Licensing Officer, Metropolitan Police Service, Harrow Licensing Unit, Licensing Department, Harrow Police Station, 74 Northolt Road, South Harrow, London HA2 0DN

# 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 or typed in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

I/ we	Lidl UK GmbH			
being the pre named in the	emises licence holder, a application as the pren	pply to vary a pre nises supervisor (	mises licence to under section 37	o specify the individual 7 of the Licensing Act 2003
Premises Lic	ence Number			
LN/000000	596/2014/4			
Part 1 - Prem	ises Details ss of premises or, if nor	a ordnance cur	av man safa	
80-82 The E	Broadway	ie, Ordinance Surv	ey map reference	ce or description
Stanmore				
Post town	· · · · · · · · · · · · · · · · · · ·			Post code
Middlesex				11A7 4D11
Telephone Ni	umber (if any)		Α.	HA7 4DU
Description o	f Premises (please read	guidance note 1)		
	×.			
		18		
<u> </u>				

Part 2		
Full name of proposed designated premises supervisor		
Przemyslaw Imiolek (		
Personal licence number of proposed designated premises supervisor and issu	ing authorit	ty of
that licence (if any)		=
1102619 issued by Brent Council		
Tropo to too do by Brotte Council		
Full name of existing designated premises supervisor		
I dil lialite oi existing designated premises supervisor		
Matthew Dates Insure Heatles		
Matthew Peter James Hartley		
2		
	Please tic	k yes
I would like this application to have immediate effect under section 38 of the Licensing	Act 2003	V
= : : : : : : : : : : : : : : : : : : :		
I have enclosed the premises licence or relevant part of it		v
The second secon		_
(If you have not enclosed the premises licence, or relevant part of it, please give reason	ons why not)	
(,	,,	
Reasons why I have failed to enclose the premises licence or relevant part of it	_	
	Please tic	k ves
I have made or enclosed the relevant fee	☑.	,
I will give a copy of this application to the chief officer of police	<u> </u>	
I have enclosed the consent form completed by the proposed premises supervisor		
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	[7]	
I understand that if I do not comply with the above requirements my application will be	_	
- and or started that it is do not comply with the above requirements my application will be	Ojoolou 🖭	

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 a 3). If signing of	pplicant or applicant of the a	cant's solicitor or oth <u>o</u> plicant, please state	er duly authorised in what capacity	agent (see guidance note
Signature				
Date	25/11/2014			
Capacity	Licensing Ma	nager		
For joint appli authorised ag capacity	cants Signature of ent (see guidance	of 2nd applicant or 2 note 4). If signing on	nd applicant's solic behalf of the appl	citor or other duly icant, please state in what
Signature	•			
Date				
Capacity				
with this appli Licensing Dep Lidl UK Gmb	cation (please rea partment	ad guidance note 5)	tal address for cor	respondence associated
Post town				Post code
Weston-Sup	er-Mare			BS24 7TG
TELEPHONE N		· · · · · · · · · · · · · · · · · · ·		5027710
Daytime				A
Fax				
E-MAIL ADDRI	SS (if you would	prefer us to corresp	ond with you by e-	-mail)

#### **NOTES**

- 1. Describe the premises. For example, the type of premises it is
- The application form must be signed
   An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have the actual authority to do so
- 4. Where there is more than one applicant, both applicants or their respective agents must sign the
- 5. This is the address which we shall use to correspond with you about this application

## Consent of individual to being specified as premises supervisor

	2ÊMYSLAW				******
(full n	ame of prospective p	oremises supervisc	or]		
of					
7			l	•	
Phone in the late		===;======			***************************************
[nome addre	ess of prospective pr	emises supervisorj			
	nfirm that I give in relation to the		be specified a	as the designat	ed premises
Premises	Licence				
[type of app	lication]				
by					
Lidl UK C	∃mbH				
[name of app	plicant]	•••••	••••••		
relating to	a premises licen	ce	acisting licence, if a	696/201 any]	+14.
for 80	-32 the	Broadwa	عدم .		
S	stemmore	ei.			
+-(	UOY FA	å			
Iname and a	ddress of premises	o which the applic	ation relates)		

and any premises licence by	e to be granted or varied in respect of this application made
Lidl UK GmbH	
[name of applicant]	
concerning the supply of	alcohol at
80-82 The f	3roadway.
Stanmore	
tlaa 40u	
Iname and address of premis	ses to which application relates]
I also confirm that I am licence, details of which Personal licence number	applying for, intend to apply for or currently hold a personal I set out below.
[insert personal licence number	ər, if any]
Personal licence issuing	authority
Blent Concul [insert name and address and	telephone number of personal licence issuing authority, if any]
Signed	<i>x</i> -
Name (please print)	PRZEMYSLAW IMIOLEK
Date	28/11/14



Harrow Council Receipt

The following Cheque has been received on 26/11/2014:

From:

for and on behalf of LIDL UK GMBH - Licensing

For:

Lidl UK GmbH

80 - 82 The Broadway Stanmore Middlesex HA7 4DU

Amount:

£23.00

In respect of

Variation of DPS