

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

Section 1 of 4		
You can save the form at an	y 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	JL/PREM/LON117	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 I • Yes	oehalf of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Premier Inn Hotels LTD	
* Family name	As above	
* E-mail	JLacey@john-gaunt.co.uk	
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if the ap	plicant would prefer not to be contacted by te	lephone
Is the applicant:		
Applying as a businesApplying as an individ	s or organisation, including as a sole trader Iual	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?	Yes No	Note: completing the Applicant Business section is optional in this form.
Registration number	5137608	
Business name	Premier Inn Hotels LTD	If the applicant's business is registered, use its registered name.
VAT number GB	243292864	Put "none" if the applicant is not registered for VAT.
Legal status	Private Limited Company	

Continued from previous page		
Applicant's position in the business	N/A	
Home country	United Kingdom	The country where the applicant's headquarters are.
Registered Address		Address registered with Companies House.
Building number or name	Whitbread Court, Houghton Hall Business Park	
Street	Porz Avenue	
District		
City or town	Dunstable	
County or administrative area		
Postcode	LU5 5XE	
Country	United Kingdom	
Agent Details		
* First name	Joe	
* Family name	Lacey	
* E-mail	JLacey@john-gaunt.co.uk	
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 actir 	ng as an agent	person without any special regards actions.
Agent Business		
Is your business registered in the UK with Companies House?		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 GB	651652	Put "none" if you are not registered for VAT.
Legal status	Partnership	

Continued from previous page			
Your position in the business	Paralegal		
Home country	United Kingdom	The country where the headquarters business is located.	of your
Agent Business Address		If you have one, this should be your o	
Building number or name	Omega Court	address - that is an address required of by law for receiving communications	
Street	372-374 Cemetery Road		
District			
City or town	Sheffield		
County or administrative area	South Yorkshire		
Postcode	S11 8FT		
Country	United Kingdom		
Section 2 of 4			
PREMISES DETAILS			
I/we apply to vary a premises li section 37 of the Licensing Act		named in this application as the premises supervisor u	nder
* Premises licence number	LN/000000999/2011/10		
Are you able to provide a posta	al address, OS map reference	description of the premises?	
AddressOS ma	p reference O Descript	on	
Address			
* Building number or name	London Edgeware Premier Ir	1	
* Street	435 Burnt Oak Broadway		
District	Edgeware		
* City or town	London		
County or administrative area	Middlesex		
Postcode	HA8 5AQ		
* Country	United Kingdom		
Contact Details			
E-mail			
Telephone number			
Other telephone number			
Describe the premises. For exa	mple, what type of premises i	is .	

Full Name Of Proposed Designated Premises Supervisor * First name	Continued from previous page		
Full Name Of Proposed Designated Premises Supervisor * First name	Hotel		
Full Name Of Proposed Designated Premises Supervisor * First name			
Full Name Of Proposed Designated Premises Supervisor * First name			
*First name Jolanta *First name Nowak Nowak Personal licence number of proposed designated premises Supervisor Issuing authority of that licence Harrow Council *Full Name Of Existing Designated Premises Supervisor Full Name Of Existing Designated Premises Supervisor First name Christian *Would you like this application to have immediate effect under section 38 of the Licensing Act 2003? *Yes	Section 3 of 4		
* Family name Dolanta	SUPERVISOR		
*Family name Mowak	Full Name Of Proposed Desi	gnated Premises Supervisor	
dd mm yyyy Personal licence number of proposed designated premises supervisor Issuing authority of that licence Full Name Of Existing Designated Premises Supervisor First name Christian * Would you like this application to have immediate effect under section 38 of the Licensing Act 2003? • Yes No I will notify the existing premises supervisor (if any) of this application lit is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application? • Yes No How will the premises licence or relevant part of it be submitted with this application? • 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	* First name	Jolanta	
Personal licence number of proposed designated premises supervisor Issuing authority of that licence Harrow Council Full Name Of Existing Designated Premises Supervisor First name Christian Family name * Would you like this application to have immediate effect under section 38 of the Licensing Act 2003? • Yes No I will notify the existing premises supervisor (if any) of this application * Will the premises licence or relevant part of it be submitted with this application? • Yes No No How will the consent form of the proposed designated premises supervisor be supplied to the authority? Electronically, by the proposed designated premises supervisor	* Family name	Nowak	
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Full Name Of Existing Designated Premises Supervisor First name	premises supervisor		
Full Name Of Existing Designated Premises Supervisor First name		Harrow Council	
First name Christian Neale * Would you like this application to have immediate effect under section 38 of the Licensing Act 2003? No No I will notify the existing premises supervisor (if any) of this application * Will the premises licence or relevant part of it be submitted with this application? Yes No No Blook premises licence or relevant part of the proposed designated premises supervisor Blook premises supervisor Blook premises licence or relevant part of the proposed designated premises supervisor Blook will the consent form of the proposed designated premises supervisor Blook premises licence or relevant part of the proposed designated premises supervisor Blook premises licence holder can continue the supply of alcohol if, for example, the existing premises supervisor is suddenly indisposed or unable to work. It is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application.			
*Would you like this application to have immediate effect under section 38 of the Licensing Act 2003? *Yes No I will notify the existing premises supervisor (if any) of this application *Will the premises licence holder can continue the supply of alcohol if, for example, the existing premises supervisor is suddenly indisposed or unable to work. It is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application? *Will the premises licence or relevant part of it be submitted with this application? No How will the consent form of the proposed designated premises supervisor be supplied to the authority? Electronically, by the proposed designated premises supervisor	Full Name Of Existing Design	nated Premises Supervisor	
*Would you like this application to have immediate effect under section 38 of the Licensing Act 2003? Yes No No I will notify the existing premises supervisor (if any) of this application *Will the premises licence or relevant part of it be submitted with this application? Yes No Ro Ro Ro Ro Ro Ro Ro Ro Ro	First name	Christian	
the Licensing Act 2003? Yes No No I will notify the existing premises supervisor (if any) of this application Will the premises licence or relevant part of it be submitted with this application? Yes No It is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application? 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	Family name	Neale	
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How will the consent form of the proposed designated premises supervisor be supplied to the authority? © Electronically, by the proposed designated premises supervisor		relevant part of it be submitted with this	
be supplied to the authority? C Electronically, by the proposed designated premises supervisor	Yes	○ No	
		the proposed designated premises supervisor	
	C Electronically, by the pro	pposed designated premises supervisor	
As an attachment to this variation	As an attachment to this	variation	

Continued from previous page	Reference number for consent form (if known)
If the consent form is already so the proposed designated prem supervisor for its 'system refere reference'	nises
Section 4 of 4	
PAYMENT DETAILS	
This fee must be paid to the au	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	
statement in or in connection I/WE UNDERSTAND THAT IT IS STATEMENT IN OR IN CONNECTION TO A IN A PARTNERSHIP WHICH IS * PARTNERSHIPS] IT IS AN OFFE THEY KNOW, OR HAVE REASO THEIR IMMIGRATION STATUS. TO EMPLOYMENT WILL BE LIA NATIONALITY ACT 2006 AND, THEY DO SO IN THE KNOWLEI	ce, liable on conviction to a fine under section 158 of the licensing act 2003, to make a false with this application. S AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE CTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON FINE OF ANY AMOUNT. [APPLICABLE TO INDIVIDUAL APPLICANTS ONLY, INCLUDING THOSE NOT A LIMITED LIABILITY PARTNERSHIP, BUT NOT COMPANIES OR LIMITED LIABILITY ENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971] FOR A PERSON TO WORK WHEN DINABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS ABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE DGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED. Les you have read and understood the above declaration Led by the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant, unless you answered "Yes" to the question "Are you an agent acting on the company of the applicant the company of the applicant the page of the company of the applicant the company
* Full name	John Gaunt & Partners
* Capacity	Solicitor to the applicant
* Date	dd mm yyyy Remove this signatory
	Add another signatory

OFFICE USE ONLY		
Applicant reference number	JL/PREM/LON117	
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		
< Previous <u>1</u> <u>2</u> <u>3</u> <u>4</u>	Next >	

CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS PREMISES SUPERVISOR

(full name of prospective premises supervisor)
(full name of prospective premises supervisor)
of
(home agaress or prospective premises supervisor)
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 by INTERESTAND PLC CHRISTIAN NEAL REMISER IN NHOTELS LTD (name of applicant/premises licence holder) relating to a premises licence LN 000000 999 2017 16
(number of existing licence, if any) for the LONDON EDGUARE PRENIER INN 435 BUENT OAK BRODUTAY (name & address of premises to which the application relates) HA 8 5 AQ
and any premises licence to be granted or varied in respect of this application made by NEW NEW NEW NEW LINE HOTELS LID (name of applicant/premises licence holder)
concerning the supply of alcohol at the LONDON EDGLINEE PREMIER INN (name & address of premises to which the application relates)
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: L/N/ 00000 82 35 2015/1
Personal Licence issuing authority: LARROLS COUNCIL

#400017400447,7579J
Signed:
Tollerthe Nov File
Name (please print): 12 04 18
Date: