

**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.

I / **MR JAMES FRANCES KELLY**

*(full name(s) of premises licence holder)*

**being the premises licence holder, apply to vary a premises licence to specify the individual named in this application as the premises supervisor under section 37 of the Licensing Act 2003**

**Premises licence number**

**LN/000000663/2014/5**

**Part 1 – Premises details**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b> JAMESONS BAR, 34 SOUTH PARADE, MOLLISON WAY, EDGWARE, HA8 5QL	
<b>Post town</b> EDGWARE	<b>Post code (if known)</b> HA8 5QL
<b>Telephone number (if any)</b>	

<b>Description of premises (please read guidance note 1)</b> PUBLIC HOUSE
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**Part 2**

**Full name of proposed designated premises supervisor**  
JAMES FRANCES KELLY

**Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)**  
140180 LONDON BOROUGH OF BRENT

**Full name of existing designated premises supervisor (if any)**  
URSZULA BIELICKA

**Please tick yes**

I would like this application to have immediate effect under section 38 of the Licensing Act 2003 X

I have enclosed the premises licence or relevant part of it X

(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**

- I have made or enclosed payment of the fee X
- I will give a copy of this application to the chief officer of police X
- I have enclosed the consent form completed by the proposed premises supervisor X
- I have enclosed the premises licence, or relevant part of it or explanation X
- I will give a copy of this form to the existing premises supervisor, if any X
- I understand that if I do not comply with the above requirements my application will be rejected X

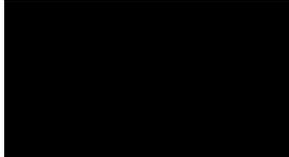
**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE , UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Consent of individual to being specified as premises supervisor**

**MR JAMES FRANCES KELLY**

.....  
*[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 designated premises supervisor in relation to the application for

**VARIATION OF THE DPS**

.....  
*[type of application]*

by

**MR JAMES FRANCES KELLY**

.....  
*[name of applicant]*

relating to a premises licence

**LN/000000663/2014/5**

.....  
*[number of existing licence, if any]*

for

**JAMESONS BAR,  
34 SOUTH PARADE,  
MOLLISON WAY,  
EDGWARE,  
HA8 5QL**

.....  
*[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

MR JAMES FRANCES KELLY

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*[name of applicant]*

concerning the supply of alcohol at

JAMESONS BAR,  
34 SOUTH PARADE,  
MOLLISON WAY,  
EDGWARE,  
HA8 5QL

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*[name and address of premises to which application relates]*

I 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

140180

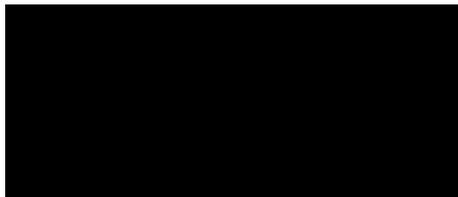
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*[insert personal licence number, if any]*

Personal licence issuing authority

LONDON BOROUGH OF BRENT

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*[insert name and address and telephone number of personal licence issuing authority, if any]*

Signed



Name (please print)

MR JAMES FRANCES KELLY

Date

3/2/2015