## 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 / we Iceland Foods	s Lta
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(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

0806-77JF-RRGX-FQJN

### Part 1 - Premises details

Postal address of premises or, if none, ordnance survey map reference or description

153 Burnt Oak Broadway

Burnt Oak

Post townPost code (if known)EdgwareHA8 5EJ

Telephone number (if any)

**Description of premises** (please read guidance note 1)

A retail supermarket-type premises providing customers with a wide range of foodstuffs, goods and other services including the sale of alcoholic products for consumption off the premises.

### Part 2

Full name of proposed designated premises supervisor James Chaplin				
Personal licence number of proposed designated premises supervisor a issuing authority of that licence (if any) Watford Borough Council 10/00072/LAPER	and			
Full name of existing designated premises supervisor (if any) Paul Flaherty				
	e tick yes			
I would like this application to have immediate effect under section 38 of the Licensing Act 2003	<b>✓</b>			
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 reasons why not)	give			
Reasons why I have failed to enclose the premises licence or relevant part	of it			
Pleas	e tick yes			
. I have made or enclosed payment of the fee	V			
. I will give a copy of this application to the chief officer of police	<b>V</b>			
. I have enclosed the consent form completed by the proposed premises supervisor	<b>V</b>			
. I have enclosed the premises licence, or relevant part of it or explanation	V			
. I will give a copy of this form to the existing premises supervisor, if any	V			
. I understand that if I do not comply with the above requirements my application will be rejected	V			
IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE	D LEVEI			

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.

Signature				
Date #108/14				
Capacity Authorised signatory for and on behalf of Iceland Foods Ltd				
	••••••			
For joint applicants signature of 2nd applicant 2nd 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	•••••••••••••••••••••••••••••••••••••••			
Contact name (where not previously given) and postal a				
correspondence associated with this application (please	read guidance note 5)			
Licensing Department Iceland Foods Ltd				
Second Avenue				
Deeside Industrial Park				
Deeside				
Flintshire				
Post town	Post Code			
Deeside	CH5 2NW			
Telephone number (if any) 01244 843610				
If you would prefer us to correspond with you by e-mail (optional)	l your e-mail address			

### Guidance notes

- 1. Describe the premises. For example the type of premises it is.
- 2. The application form must be signed.
- 3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- 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

JAMES CHAPLIN
[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 Designated Premises Supervisor
[type of application]
by
Iceland Foods Ltd
[name of applicant]
relating to a premises licence [number of existing licence, if any]
for
ICELAND BURNT OAK 0637.
153 Burnt Oak Broadway
Burnt oak
Edgware HA8 5EJ [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
Iceland Foods Ltd
[name of applicant]
concerning the supply of alcohol at
153 Burnt Oak Broadway
Burnt oak
Burnt oak Edgware
HAS 5EJ [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
10 /00072 /LAPER [insert personal licence number, if any]
Personal licence issuing authority
Watford Borough Council [insert name and address and telephone number of personal licence issuing authority, if any]
Signed
Name (please print)
Date 11/07/14.

### **Additional Information**

I also confirm the following

Date of Birth	
Place of Birth _	 
Signed:	

# remises Licence

# LICENSING ACT 2003

Schedule 12
Part A (Regulation 33,34)
HARROW COUNCIL, P O BOX 18, STATION ROAD, HARROW

Premises	Т	icence	N	Jum	her
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LN/000000656/2014/10

Part 1 – Premises details

Postal address of premises, or if none, ordnance survey map reference or description:

Iceland.co.uk, 153 Burnt Oak Broadway, Edgware, Middlesex, HA8 5EJ

Telephone Number: 01244 830 100

Where the licence is time limited, the dates:

N/A

Licensable activities authorised by the licence:

Sale of retail alcohol

Signed by Richard LeBrun Environmental Services Manager (Public Protection)



Licensable a	rea			
Hours open	to pul	olic (Not S	Specified)	
Sunday	-			
Monday	-	- 1		
Tuesday	-	-		
Wednesday		-		
Thursday	-	to Allega		
Friday	-	-		
Saturday	-			

The times the licence authorises the carrying out of licensable activities Location: Licensable area

### Sale of retail alcohol

 Sunday
 10:00 - 22:30 

 Monday
 08:00 - 23:00 

 Tuesday
 08:00 - 23:00 

 Wednesday
 08:00 - 23:00 

 Thursday
 08:00 - 23:00 

 Friday
 08:00 - 23:00 

 Saturday
 08:00 - 23:00 

- 1. On Christmas day, 12 noon to 3 p.m. and 7 p.m. to 10.30 p.m.
- 2. On Good Friday, 8 a.m. to 10.30 p.m.
- 3. Sale by retail of alcohol can be extended between the terminal hour on New Year's Eve and the commencement hour on the following morning.
- 4. The above restrictions do not prohibit:
  - a. The ordering of alcohol to be consumed off the premises or the despatch by the vendor of the alcohol so ordered;
  - b. The sale of alcohol to a trader or club for the purposes of the trade or club;
  - c. The sale or supply of alcohol to any canteen or mess, being a canteen in which the sale or supply of alcohol is carried out under the authority of the secretary of state or an authorised mess of members of her majesty's naval, military or air forces.

Where the licence authorises supplies of alcohol – whether these are on and/or off supplies

Sale by retail off premises



### Part 2

Name, (registered) address, telephone number and email (where relevant of holder of premises licence:

Iceland Foods Limited

2nd Avenue

Deeside Industrial Park

Deeside

Flintshire

CH5 2NW

Telephone: 01244 843 610

Email:

Registered number of holder, for example company number, charity number (where applicable): 01107406

Name, address and telephone number of designated premises supervisor where the premises licence authorises for the supply of alcohol:

Paul Michael Flaherty

Personal licence number and issuing authority of personal licence held by designated premises supervisor – where the premises licence authorises for the supply of alcohol:

**LONDON BOROUGH OF EALING - 01395** 

State whether access to the premises by children is restricted or prohibited: N/A



### Annex 1 - Mandatory Conditions

### Mandatory conditions where licence authorises supply of alcohol:

- 1 No supply of alcohol may be made under the premises licence
  - a) at a time when there is no designated premises supervisor in respect of the premises licence, or
  - b) at a time when the designated premises supervisor does not hold a personal licence or his personal licence is suspended
- 2. Every supply or sale of alcohol made under the premises licence must be made or authorised by a person who holds a personal licence.

### Mandatory condition where licence requires door supervision:

Where one or more individuals are required to be at the premises to carry out a security activity, such individual(s) must be licensed by the Security Industry Authority.

### **Mandatory Conditions Order 2010**

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(e)selling or supplying alcohol in association with promotional posters or flyers on, or in the vicinity of the premises which can reasonably be considered to conducte, encourage or glamorist anti-ocal behaviour or to refer to the effects of drankenness in also favourable manner.

2. The responsible person shall extend to the person dispensed directly by one person into the

of a deability b

- 3. The responsible per a point cosme that the tip water type and or request to customers where it is reasonable available.
- 4.—(1) The premises licence holder or club premises certificate holder shall ensure that an age verification policy applies to the premises in relation to the sale or supply of alcohol.
- (2) The policy must require individuals who appear to the responsible person to be under 18 years of age (or such older age as may be specified in the policy) to produce on request, before being served alcohol, identification bearing their photograph, date of birth and a holographic mark.

5. The responsible person with events

on where are of the inflowing alcoholic day. A supplied for a supp

pulses or other approximation of the control of the

It can request are made in the or the registration of the company

### Annex 2 - Conditions consistent with the Operating Schedule

None

Annex 3 - Conditions attached after a hearing by the Licensing Authority

None

Informative:

Variation of DPS - 03 March 2014

Annex 4 – Plan Attached.

Date of original grant: 20/04/2006	Reason for issue: Variation Of DPS
Date of issue: 6th March 2014	Issue Number: 10



# LICENSING ACT 2003

Schedule 12 Part B | Premises Licence Number: LN/000000656 /2014/10

### Premise Details:

Iceland.co.uk, 153 Burnt Oak Broadway, Edgware, Middlesex, HA8 5EJ Telephone Number: 01244 830 100

Authorised Licensable Activities:

### Sale of retail alcohol

The times the licence authorises the carrying out of licensable activities:

Hours open to public		
Monday – Sunday	Not Specified	
Sale of retail alcohol		
Monday – Saturday	08:00 - 23:00	-District
Sunday	10:00 - 22:30	
W/leans the line research suices		.1

Where the licence authorises supplies of alcohol whether these are on and/or off supplies

Sale by retail off premises

Name, (registered) address, telephone number and email (where relevant) of holder of premises licence

**Iceland Foods Limited** 

2nd Avenue, Deeside Industrial Park, Deeside, Flintshire, CH5 2NW

Registered number of holder, for example company number, charity number where applicable):

01107406

Name of designated premises supervisor where the premises licence authorises for the supply of alcohol:

Paul Michael Flaherty

State whether access to the premises by children is restricted or prohibited:

N/A

Date of original grant: 20/04/2006 Date of issue: 6th March 2014

Reason for issue: Variation Of DPS Issue Number: 10

Signed by Richard LeBrun

Environmental Services Manager (Public Protection)

