

\* required information

### Section 1 of 4

You can save the form at any 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

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 behalf of the applicant?

Yes  No

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

Emrah

\* Family name

Polat

\* E-mail

Main telephone number

Include country code.

Other telephone number

Indicate here if you would prefer not to be contacted by telephone

Are you:

Applying as a business or organisation, including as a sole trader

Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

Continued from previous page...

**Your Address**

Address official correspondence should be sent to.

* Building number or name	<input type="text" value="6"/>
* Street	<input type="text" value="Station Parade, Whitchurch Lane"/>
District	<input type="text"/>
* City or town	<input type="text" value="Edgware"/>
County or administrative area	<input type="text" value="Middlesex"/>
* Postcode	<input type="text" value="HA8 6RW"/>
* Country	<input type="text" value="United Kingdom"/>

**Section 2 of 4**

**PREMISES DETAILS**

I/we 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	<input type="text" value="LN/000012530/2018/1"/>
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Are you able to provide a postal address, OS map reference or description of the premises?

- Address     OS map reference     Description

**Address**

* Building number or name	<input type="text" value="6"/>
* Street	<input type="text" value="Station Parade, Whitchurch Lane"/>
District	<input type="text"/>
* City or town	<input type="text" value="Edgware"/>
County or administrative area	<input type="text" value="Middlesex"/>
Postcode	<input type="text" value="HA8 6RW"/>
* Country	<input type="text" value="United Kingdom"/>

**Contact Details**

E-mail	<input type="text"/>
Telephone number	<input type="text"/>
Other telephone number	<input type="text"/>

Describe the premises. For example, what type of premises it is

<input type="text" value="Newsagent, Off licence"/>
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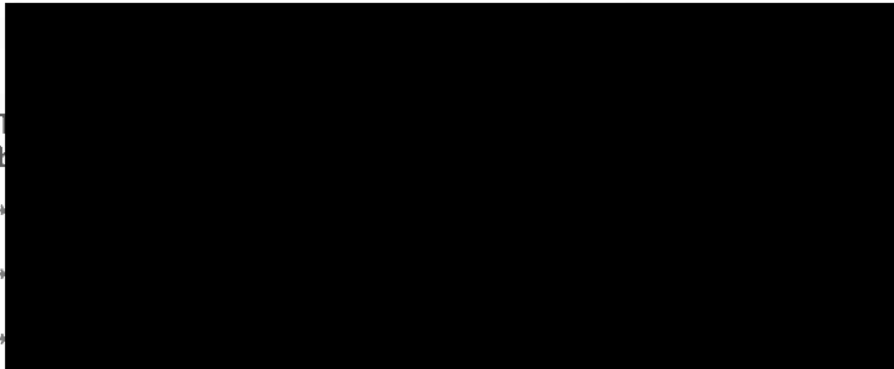
This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

This formality requires a fixed fee of £23

## DECLARATION

\* I/we understand it is an offence, liable on conviction to a fine under section 158 of the licensing act 2003, to make a false statement in or in connection with this application.

I/WE UNDERSTAND THAT IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT. [APPLICABLE TO INDIVIDUAL APPLICANTS ONLY, INCLUDING THOSE IN A PARTNERSHIP WHICH IS NOT A LIMITED LIABILITY PARTNERSHIP, BUT NOT COMPANIES OR LIMITED LIABILITY PARTNERSHIPS] IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971] FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.



Declaration

" to the question "Are you an agent acting on

dd mm yyyy

Remove this signatory

Full name

Capacity

\* Date

 /  / 

dd mm yyyy

Remove this signatory

Add another signatory

**OFFICE USE ONLY**

Applicant reference number	EI/YALCIN/2020/cnv/001
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	<input type="checkbox"/>

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\* required information

### Section 1 of 3

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Your reference

[REDACTED]

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Are you an agent acting on behalf of the applicant?

Yes  No

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

Emrah

\* Family name

Polat

\* E-mail

[REDACTED]

Main telephone number

Include country code.

Other telephone number

Indicate here if you would prefer not to be contacted by telephone

Are you:

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 Applying as an individual

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Continued from previous page...

**Your Address**

Address official correspondence should be sent to.

\* Building number or name

\* Street

District

\* City or town

County or administrative area

\* Postcode

\* Country

**Section 2 of 3**

**CONSENT**

**Name Of Proposed Premises Supervisor**

\* First name

\* Family name

**Address Of Proposed Premises Supervisor**

\* Building number or name

\* Street

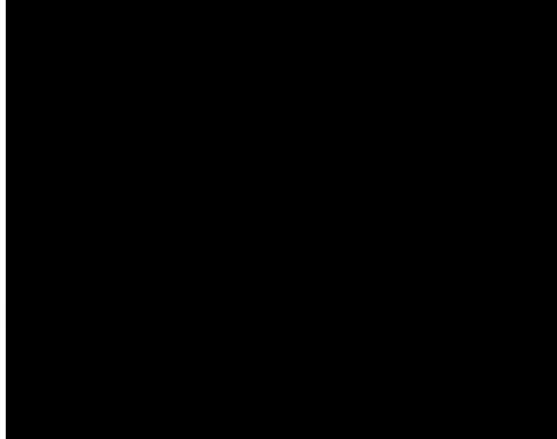
District

\* City or town

County or administrative area

Postcode

\* Country



I hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the following application, and any premises licence to be granted or varied in respect of this application concerning the supply of alcohol at the premises

\* Type of application  For instance 'Application for a premises licence' or 'Variation of a premises licence'

Is the application or variation that this consent is being submitted in connection with being supplied electronically to the authority

Yes  No  Don't know

Reference number of electronic application (if known)  If the application or variation form is already submitted, ask its applicant for the form's 'system reference' or 'your reference'.

Continued from previous page...

**Premises Licence Holder**

\* Name

**Address Of Premises**

\* Building number or name

\* Street

District

\* City or town

County or administrative area

Postcode

**Premises**

Premise licence number

\* Name of premises

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

Personal licence issuing authority name

**Address Of Personal Licence Issuing Authority**

Building number or name

Street

District

City or town

County or administrative area

Postcode

**Contact Details Of Personal Licence Issuing Authority**

Telephone number

**Section 3 of 3**

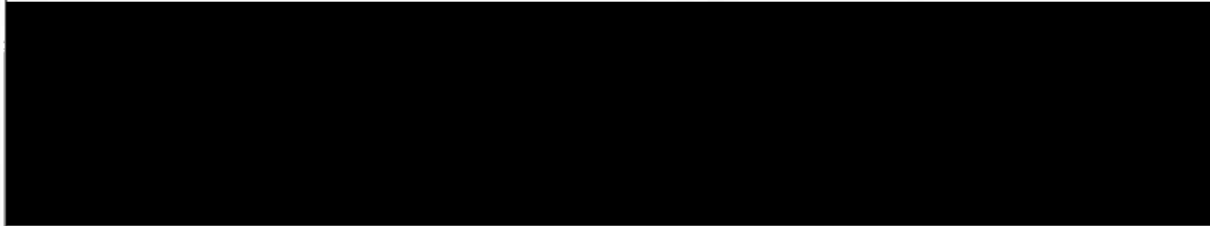
**DECLARATION**

\* I 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 have set out in this form.



*Continued from previous page...*

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"



Add another signatory

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/harrow/change-7> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.