

## 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		
	time and resume it later. You do not need to I	pe 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	SWA Waitrose South Harrow	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 be		Put "no" if you are applying on your own behalf or on behalf of a business you own or
• Yes O	No	work for.
Applicant Details		
* First name	Waitrose Ltd	
* Family name	As above	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if the appl	licant would prefer not to be contacted by tel	ephone
Is the applicant:		
<ul><li>Applying as a business of</li></ul>	or organisation, including as a sole trader	A sole trader is a business owned by one person without any special legal structure.
<ul> <li>Applying as an individu</li> </ul>	al	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	99405	
Business name	Waitrose Ltd	If the applicant's business is registered, use its registered name.
VAT number	NA	Put "none" if the applicant is not registered for VAT.
Legal status Private Limited Company		

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Applicant's position in the business	Owner/operator				
Home country	United Kingdom	The country where the applicant's headquarters are.			
Registered Address		Address registered with Companies House.			
Building number or name	171				
Street	Victoria Street				
District					
City or town	London				
County or administrative area					
Postcode	SW1E 5NN				
Country	United Kingdom				
Agent Details					
* First name					
* Family name					
* E-mail					
Main telephone number		clude country code.			
Other telephone number					
☐ Indicate here if you wou	☐ Indicate here if you would prefer not to be contacted by telephone				
Are you:					
An agent that is a business or organisation, including a sole trader		A sole trader is a business owned by one person without any special legal structure.			
<ul> <li>A private individual actir</li> </ul>	ng as an agent	person mineut any special regardination			
Agent Business					
Is your business registered in the UK with Companies House?	○ Yes	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	NA	Put "none" if you are not registered for VAT.			
Legal status	Partnership				
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Your position in the business	Client Support Manager	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Business Address		If you have one, this should be your official
Building number or name	Units 39-41 Haslar Marine Technology Park	address - that is an address required of you by law for receiving communications.
Street	Haslar Road	
District		
City or town	Gosport	
County or administrative area	Hampshire	
Postcode	PO12 2AG	
Country	United Kingdom	]
Section 2 of 4		
PREMISES DETAILS		
I/we apply to vary a premises li section 37 of the Licensing Act	cence to specify the individual named in this a 2003.	pplication as the premises supervisor under
* Premises licence number	LN/00000891/2019/11	
Are you able to provide a post	al address, OS map reference or description of t	the premises?
<ul><li>Address</li><li>OS ma</li></ul>	p reference O Description	
Address		
* Building number or name	Waitrose, 140	]
* Street	Northolt Road	]
District		]
* City or town	South Harrow	]
County or administrative area	Middlesex	]
Postcode	HA2 0EG	
* Country	United Kingdom	]
Contact Details		<u></u>
E-mail		
Telephone number		
Other telephone number		
Describe the premises. For exa	mple, what type of premises it is	<u> </u>

Continued from previous page		
Retail store with licensed facil	ities	
Section 3 of 4		
SUPERVISOR		
Full Name Of Proposed Design	gnated Premises Supervisor	
* First name	lan Roger	
* Family name	Barrett	
* Nationality		
* Place of birth	Hillingdon	
* Date of birth	dd mm yyyy	
Personal licence number of proposed designated premises supervisor	LBHIL1673	
Issuing authority of that licence	Hillingdon	
Full Name Of Existing Design	nated Premises Supervisor	
First name	Gary	
Family name	Howkins	
* Would you like this application to have immediate effect under section 38 of the Licensing Act 2003?		The premises licence holder can continue the supply of alcohol if, for example, the
<ul><li>Yes</li></ul>	○ No	existing premises supervisor is suddenly indisposed or unable to work.
☑ I will notify the existing	g premises supervisor (if any) of this application	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 rapplication?	elevant part of it be submitted with this	
<ul><li>Yes</li></ul>	○ No	
How will the consent form of t be supplied to the authority?	he proposed designated premises supervisor	
C Electronically, by the pro	posed designated premises supervisor	
As an attachment to this	variation	

Continued from previous page  Reference number for consent			
	form (if known)	DPS consent	
If the consent form is already so the proposed designated prem supervisor for its 'system refere reference'	nises		
Section 4 of 4			
PAYMENT DETAILS			
•		lication online, you must pay it by debit or credit card.	
This formality requires a fixed f	ee of £23		
DECLARATION			
<ul> <li>I/we understand it is an offen statement in or in connection</li> </ul>		under section 158 of the licensing act 2003, to make a false	
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.			
☐ Ticking this box indicates you have read and understood the above declaration			
This section should be completed behalf of the applicant?"	ted by the applicant, unless you	answered "Yes" to the question "Are you an agent acting on	
* Full name			
* Capacity			
* Date	19 / 11 / 2020		
	dd mm yyyy		
	Remove this signato	pry	
Full name			
Capacity			
* Date	dd mm yyyy		
	Remove this signato	vry	
	Add another signato	ory	

OFFICE USE ONLY			
Applicant reference number	SWA Waitrose South Harrow		
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			
1 <u>2</u> <u>3</u> <u>4</u>	Next >		

## CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS PREMISES SUPERVISOR

i. Ian Roger Barrett

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 **Waltrose Limited** 

relating to a premises licence LN/000000891/2018/10

for the Waitrose, 140 Northolt Road, South Harrow HA2 0EG

and any premises licence to be granted or varied in respect of this application made by Waltrose Limited

concerning the supply of alcohol at the Waltrose, 140 Northolt Road, South Harrow HA2 0EG

l 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				LBHIL1673	
Personal	Licence		issuing	authority	
Date		of		birth	
Place		of		birth	
Hillingdon					
Nationality:					
Mobile/contact		telephone		number.	
Ian Barrett		Your IST			