

APPLICATION TO VARY THE DPS ON A PREMISES LICENCE

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.

ING SELLATHURA, PRARAHARAN

Premises licence number

610

Part 1 - Premises details

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

261 HIGH ROAD WILLESDEN Post Code Post Town NWID 2RX LOWDON Telephone number (if any) 6595145 0208

Application.doc

Description of premises (please read guidance note 1)

Off licence

Part 2

Full name of proposed designated premises supervisor

MR. KANAPATHIPILLAI

LOCIANATHAN

Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)

Full name of existing designated premises supervisor (if any) MR. MANICKAM RAJEETHARAN

Please tick - Yes

0

1V

I would like this application to have immediate effect under section 38 of the Licensing Act 2003 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 give reasons why not)

Reasons why I have failed to enclose the premises licence or relevant part of it				
	-			

Please tick - Yes

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



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

Part 3 - Signatures (please read guidance note 2)

Signature of applicant or applicant's solicitor or other duly authorised agent. (Please read guidance note 3). If signing on behalf of the applicant please state in what capacity.

C. Vrell.				
Signature				
Date 15/12/2014				
Capacity OWNER				
For joint applications signature of 2 nd applicant or 2 nd 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 address for correspondence associated with this application (please read guidance note 5)				
Post town	Post code			
Telephone number				
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)				

Guidance Notes

- 1. Describe the premises. For example the type of premises it is.
- 2. The application form must be signed.
- 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.

Data Protection: The London Borough of Brent will use this information for the purposes of The Licensing Act 2003 and related purposes. Any member of the public may examine the application form on request. In addition, this information may be disclosed to the Police, The London Fire and Emergency Planning Authority, relevant ward Councillors and other Council departments.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with law enforcement agencies and other bodies responsible for auditing or administering public funds for these purposes.

Please return the completed form and accompanying documents (listed in the checklist on page 2) to:-

Brent Council Safer Streets (Licensing) Fifth Floor Brent Civic Centre Engineers Way Wembley HA9 0FJ

020 8937 5359

Email: environmentandprotection@brent.gov.uk

Cheques should be crossed and made payable to London Borough of Brent.

Please submit a copy of this application to:-

Chief Officer of Police Brent Licensing Department Fifth Floor Brent Civic Centre Engineers Way Wembley HA9 0FJ

Tel: 020 8733 3206

Official Use Only.	DPS Consent Form		Fee 🛛	
	Premises Licence or	Relevant F	Part or Explanati	on 🗋



DESIGNATED PREMISES SUPERVISOR CONSENT FORM

Consent of individual to being specified as premises supervisor

if you are completing this form by hand please use black ink and write legibly in block capitals.

1 KANAPATHIPILLAI LOGANATHAN
[full name of prospective premises supervisor) of HITH ROAD FOOD AND WINE
frome 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 VARY DPS
······································
vary of DPSI by SELLATHURAL PRAKAHARAN
relating to premises licence HUNH CAP FOOR AV2 WING inumber of existing licence, if eny
for 261 HIMH ROAD
WILLESDEN
London
NWID 2RX [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
SELLIATHURIAL PRASAHARAS [name of applicant]
concerning the supply of alcohol at HINH ROAD FOOD AND WINS
261 HIGH ROAD
WILLESDEN
NWID 2.R.A. [name and address of premises to which application relates],

1

Premises DPS Consent.doc

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	er- 24	3582	<u> </u>	• • • • • • • • • • • • • • • • • • •	. [insert, if any]
Personal licence issuing	g authority	BRENT	.		
issuing authority, if any]		[insərt namə t	and address and tel	ephone number of p	arsonal licence
Signed	JC (Logat			

KANAPATH PILLA LOGANATHAN (please print) 15/12/2014

STRATE NO STRATE

Data Protection: The London Borough of Brent will use this information for the purposes of Th Act 2003 and related purposes. Any member of the public may examine the application form of addition, this information may be disclosed to the Police, The London Fire and Emergency Plannin relevant ward Councillors and other Council departments.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with law enforcement agencies and other bodies responsible for auditing or administering public funds for these purposes.

Please return the completed form to:-

Safer Streets (Licensing) **Brent Civic Centre** Engineers Way Wembley HA9 OFJ

Name

Date

1020 8937 5359

Email: environmentandprotection@brent.gov.uk

Premises DPS Consent.doc