Application to transfer premises licence to be granted 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 **Ms Meriem Harchi**
(Insert name of applicant)
apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number	**1053142**

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description **Venue 777** **295 Neasden Lane** **London** **NW10 1QR**	
Post town **London**	**Post code** **NW10 1QR**
Telephone number at premises (if any)	

Please give a brief description of the premises (see note 1) **Restaurant and lounge premises providing the retail sale of alcohol, late night refreshment and regulated entertainment.**

Name of current premises licence holder **Destiny62 Limited**

Part 2 - Applicant details

In what capacity are you applying for the premises licence to be transferred to you?		
		Please tick yes
	a) an individual or individuals*	**x**
	b) a person other than an individual *	
	i. as a limited company/limited liability partnership	please complete section (B)
	ii. as a partnership (other than limited liability)	please complete section (B)
	iii. as an unincorporated association or	please complete section (B)

	iv. other (for example a statutory corporation)	please complete section (B)
	c) a recognised club	please complete section (B)
	d) a charity	please complete section (B)
	e) the proprietor of an educational establishment	please complete section (B)
	f) a health service body	please complete section (B)
	g) an individual who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales	please complete section (B)
	h) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England	please complete section (B)
	i) the chief officer of police of a police force in England and Wales	please complete section (B)

*If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or **x**
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr Mrs Miss Ms x Other title [ ]
(for example, Rev)

Surname **Harchi**		**First names** **Meriem**
Date of Birth	**Nationality** **Portuguese**	
		Please tick yes
I am 18 years old or over		x
Current residential address if different from premises address		

Post town	London	Post code	
Daytime contact telephone number			
E-mail address (optional)			
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by the service (please see note 2 for information) SHARE CODE WZ8 4D2 7PC			

Second individual applicant (fill in as applicable)

Mr Mrs Miss Ms Other title (for example, Rev)

Surname	First name
Date of Birth	Nationality
I am 18 years old or over	Please tick yes
Current residential address if different from premises address	
Post town	Post code
Daytime contact telephone number	
E-mail address (optional)	
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by the service (please see note 2 for information)	

(B) Other applicants

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc)
Telephone number (if any)
E-mail address (optional)

Part 3

Please tick yes

Are you the holder of the premises licence under an interim authority notice? **X**

Do you wish the transfer to have immediate effect? **X**

If not when would you like the transfer to take effect?

Day		Month		Year			

Please tick yes

I have enclosed the consent form signed by the existing premises licence holder

If you have not enclosed the consent form referred to above please give the reasons why not. What steps have you taken to try and obtain the consent?

The existing premises licence holder is non-operative and has refused to cooperate or engage. The application is therefore made lawfully without consent in accordance with section 42 of the Licensing Act 2003.

Please tick yes

If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003) **X**

Please tick yes

I have enclosed the premises licence

If you have not enclosed premises licence referred to above please give the reasons why not.

The premises licence is held by the Licensing Authority. The outgoing premises licence holder has failed to provide a copy.

- I have made or enclosed payment of the fee X
- I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed X
- I have enclosed the premises licence or relevant part of it or explanation X
- I have sent a copy of this application to the chief officer of police today X
- I have sent a copy of this form to the Home Office Immigration Enforcement today X
- I have included documents, or my Home Office online right to work checking service share code, to demonstrate my entitlement to work in the United Kingdom (please read note 2). [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] X
- I understand that if I do not comply with the above requirements my application will be rejected X

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.

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 for 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.

I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 2)

Part 4 – Signatures (please read guidance note 3)

Signature of applicant or applicant's solicitor or other duly authorised agent (please read guidance note 4)**. If signing on behalf of the applicant please state in what capacity.**

Signature NOEL SAMAROO MIoL

……

Date 28 January 2026

……

Capacity Duly Authorised Agent

……

For joint applicants signature of 2nd applicant, 2nd applicant's solicitor or other authorised agent (please read guidance note 5)**. If signing on behalf of the applicant please state in what capacity.**

Signature

……

Date

……

Capacity

……

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6) **NTAD CONSULTANTS LTD** **2 MAYCROFT HOUSE** **MOSSLEY HILL** **LIVERPOOL** **MERSEYSIDE**	
Post town LIVERPOOL	**Post Code L18 8BT**
Telephone number (if any) 075 4444 0655	
If you would prefer us to correspond with you by e-mail your e-mail address (optional) info@ntadconsultants.com	

Notes for guidance

1. Describe the premises. For example, the type of premises it is, its general situation and layout and any other information which would be relevant to the licensing objectives.

2. Right to work/immigration status

A licence may not be issued to an individual or an individual in a partnership which is not a limited liability partnership who is resident in the UK who:

- does not have the right to live and work in the UK; or
- is subject to a condition preventing him or her from doing work relating to the carrying on of a licensable activity.

Any licence issued in respect of an application made on or after 6 April 2017 will become invalid if the holder ceases to be entitled to work in the UK.

Applicants must demonstrate that they have the right to work in the UK and are not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

They do this in one of two ways:

1) by providing with this application copies or scanned copies of the documents which an applicant has provided, to demonstrate their entitlement to work in the UK (which do not need to be certified) as per information published on gov.uk and in guidance.
2) by providing their 'share code' to enable the licensing authority to carry out a check using the Home Office online right to work checking service (see below).

Home Office online right to work checking service.

As an alternative to providing a copy of original documents, applicants may demonstrate their right to work by allowing the licensing authority to carry out a check with the Home Office online right to work checking service.

To demonstrate their right to work via the Home Office online right to work checking service, applicants should include in this application their share code (provided to them upon accessing the service at https://www.gov.uk/prove-right-to-work) which, along with the applicant's date of birth, will allow the licensing authority to carry out the check.

In order to establish the applicant's right to work, the check will need to indicate that the applicant is allowed to work in the United Kingdom and is not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

An online check will not be possible in all circumstances because not all applicants will have an immigration status that can be shared digitally. The Home Office online right to work checking service sets out what information and/or documentation applicants will need in order to access the service. Applicants who are unable to obtain a share code from the service should submit copies of documents as set out above.

Your right to work will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with this guidance.

3. The application form must be signed.

4. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

5. Where there is more than one applicant, both applicants or their respective agents must sign the application form.

6. This is the address which we shall use to correspond with you about this application.