Premises DPS Variation



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.
I've WR G. Daniete Lat List Amort
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
201701
Part 1 – Premises details
Postal address of premises or, if none, ordnance survey map reference or description
47 CRICKLEWOOD BROADWAY CRICKLEWOOD
Post Town CRICKLEWOOD NW2-3786
Telephone number (if any)

Application.doc Page 33

Full name of proposed designated premises supervisor LISA Amore Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any) 150795 Full name of existing designated premises supervisor (if any) MR G. Danier Please tick * Yes puid like this application to have immediate effect under section 38 of the Licensing Act 2003 Prove enclosed the premises licence or relevant part of it rou 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 MR Daniel is unveachable to obtain Copy of the premises licence. Please tick * Yes I have made or enclosed payment of the fee I will give a copy of this application to the chief officer of police I have enclosed the premises licence, or the relevant part of it or explanation I have enclosed the consent form completed by the proposed premises supervisor I have enclosed the consent form completed by the proposed premises supervisor I have enclosed the consent form to the existing premises supervisor, if any	Full name of proposed designated premises supervisor LISA Amolis Personal licence number of proposed designated premises supervisor and issuing authority of that icence (if any) 150795 Full name of existing designated premises supervisor (if any) MR G. Daniel' Please tok Yes I have made or enclosed payment of the fee I have enclosed the premises licence or relevant part of it. Please tok Yes Please tok Yes I have enclosed the premises picence or police I have enclosed the premises licence, or the relevant part of it or explanation	ription of premises (please read guidance note 1)	
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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.
Signature 457 / Signature
Date
Capacity MADAGER
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)
LISA Amork
MA CRICKLEWOOD BROWN
Post town Characteristics Post code North Strain
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.
- 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.

3 Application.doc	y value his	 			e OP		

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

2 020 8937 5359

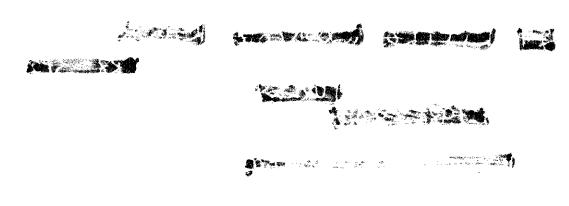
Email: environmentandprotection@brent.gov.uk

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 D	
	Premises Licence or	Relevant Part o	or Explanation	

4 Application:doc Premises DPS Variation



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.

of which I set out below.
Personal licence number - 201701 150795 [Insert, if any]
Personal licence issuing authority DREDT Council DREDT Civic Cantre, Engineers DAY
DEMBLE 1 HA9 - DFI [Insert name and address and telephone number of personal licence issuing authority, if any]
Signed 4.5
Date (please print) II II II II II II II

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details

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

20 020 8937 5359

Email: environmentandprotection@brent.gov.uk