

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/We MR. G. Daniels & Lisa Amoye

..... (full name(s) of the premises licence holder) 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 CRICKWOOD BROADWAY CRICKWOOD	
Post Town	Post Code
CRICKWOOD	NW2-3TX
Telephone number (if any)	
[REDACTED]	

Description of premises (please read guidance note 1)

RESTURANT

Part 2

Full name of proposed designated premises supervisor

LISA AMOYE

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. DANIEL

Please tick Yes

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

MR DANIEL IS UNREACHABLE 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 consent form completed by the proposed premises supervisor
- I have enclosed the premises licence, or the relevant part of it or explanation
- I will give a copy of this form to the existing premises supervisor, if any
- 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.

Signature *[Handwritten Signature]*

Date *11/11/14*

Capacity *MANAGER*

For joint applications signature of 2nd applicant or 2nd 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)	
<i>LISA AMOYE</i> <i>117 CRICKWOOD BROADWAY</i> <i>[REDACTED]</i> <i>[REDACTED]</i> <i>[REDACTED]</i> <i>[REDACTED]</i>	
Post town	<i>CRICKWOOD</i> <i>[REDACTED]</i>
Post code	<i>NU2 3JX</i>
Telephone number	<i>[REDACTED]</i>
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	
<i>[REDACTED]</i>	

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.

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

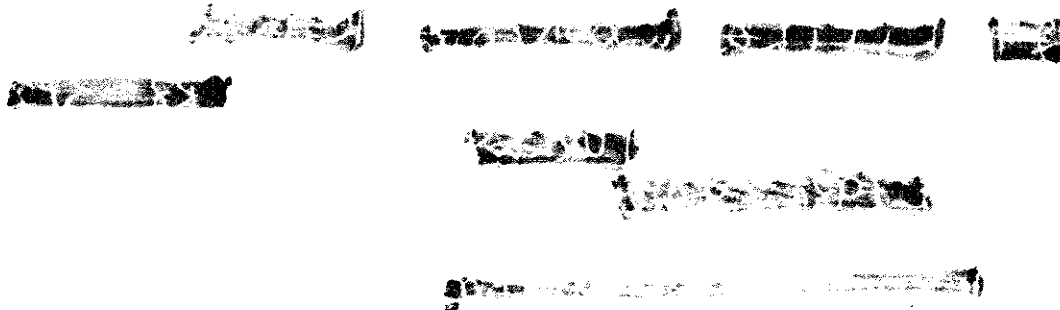
Email: environmentandprotection@brent.gov.uk

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

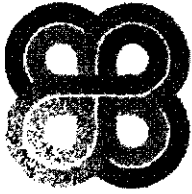
Please submit a copy of this application to:-

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 <input type="checkbox"/>	Fee <input type="checkbox"/>
	Premises Licence or Relevant Part or Explanation <input type="checkbox"/>	



Brent

**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.

I, LISA AMOTA
[full name of prospective premises supervisor] of [REDACTED]
[REDACTED]

[home 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 OF DPS AND PREMISES LICENCE TRANSFER [type of application eg, grant of new licence / vary of DPS] by LISA AMOTA [name of applicant]

relating to premises licence 150195201701 [number of existing licence, if any]

for 47 CRICKLEWOOD BROADWAY
CRICKLEWOOD
DD2-3JX [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 LISA AMOTA [name of applicant]

concerning the supply of alcohol at 47 CRICKLEWOOD BROADWAY
CRICKLEWOOD, DD2-3JX
[name and address of premises to which application relates].

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 - ~~201701~~ 150795 [insert, if any]

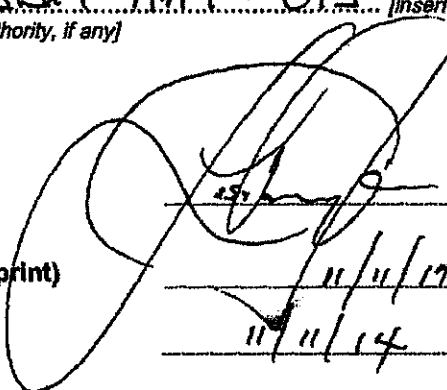
Personal licence issuing authority BRENT Council

BRENT Civic Centre, ENGINEERS WAY
WEMBLEY HA9 - 0FJ [insert name and address and telephone number of personal licence issuing authority, if any]

Signed

Name
(please print)

Date


11/11/14 Lisa Amore
11/11/14

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