

11/09/2020

Application to vary a premises licence to specify designated premises supervisor
Ref No. 1511701

Application to vary a premises licence to specify an individual as designated premises supervisor under the Licensing Act 2003

I / we (full name(s) of the current licence holders)

	Gul Mohammad
	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

	870142
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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.

Part 1 &ndash; Premises details

Address Line1	THE WINDMILL
Address Line 2	98-100 WYNDHAM ROAD
Town	LONDON
County	
Post code	SE5 0UB
Ordnance survey map reference	
Telephone number (if any)	
Email	

Description of premises (please read guidance note 1)

	Convenience store
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Guidance Note 1

Describe the premises. For example the type of premises it is.

Application to vary a premises licence to specify designated premises supervisor

Full name of proposed designated premises supervisor

First name	Gul
Surname	Mohammad

Please state your nationality

	██████████
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Please state your place of birth

	██████████
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Please state your date of birth (dd/mm/yyyy)

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

Personal licence no.	████████████████████
Issuing authority	Croydon Council

Full name of existing designated premises supervisor (if any)

First name	Sohail
Surname	Khan

Please select the appropriate option

<input type="checkbox"/>	I would like this application to have immediate effect under section 38 of the Licensing Act 2003 I have posted the premises licence or relevant part of it
<input type="checkbox"/>	(If I cannot post the premises licence or relevant part of it, please give reasons why not below)

Please scan and upload a copy of your premises licence and send the hard copy in the post

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

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If you wish to sell alcohol, the application must be accompanied by a consent form from the proposed DPS to show that they consent to taking on this responsible role. Please download the consent form. The DPS must be signed by the individual and submitted with the application.

Please select the appropriate option(s)

	<input type="checkbox"/> I will give a copy of this form to the existing premises supervisor, if any rejected <input type="checkbox"/> I have posted the premises licence, or relevant part of it
Upload consent form	_____

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

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

Name of Applicant	Gul Mohammad
Applicant's solicitor or other duly authorised agent	Debra Silvester
Capacity	Agent
Date	11/09/2020

Joint Applicants Names or Joint Applicant's solicitor or other duly authorised agent (Please read guidance notes 4)

Joint names	
Capacity	Hertford
Date	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)

Contact name	Debra Silvester
Telephone	██████████
Email	████████████████████

Postal address for correspondence associated with this application

Address Line 1	Licensing Services Agency
Address Line 2	16 Bengeo Street
Town	Hertford
County	- County -

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Post code	SG14 3ES
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Guidance Notes

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I agree that the Information i've submitted is true and accurate

	I agree
PaymentDescription	Application to vary a premises licence to specify designated premises supervisor
PaymentAmountInMinorUnits	2300
AuthCode	
LicenceReference	

I HEREBY DECLARE that the information provided is accurate and correct

I agree to the above statement

	I agree
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Consent of individual to being specified as premises supervisor

I GUL MOHAMMAD
[full name of prospective premises supervisor]


[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

Premises licence transfer/DPS change [type of application]

by GUL MOHAMMAD [name of applicant]

relating to a premises licence 870142 [number of existing licence, if any]

for 98-100 Wyndham Road

London

SES OUB

[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 GUL MOHAMMAD [name of applicant]

concerning the supply of alcohol at Food Link,

98-100 Wyndham Road, London SES OUB

[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 
[insert personal licence number, if any]

Personal licence issuing authority CROYDON COUNCIL
[insert name and address and telephone number of personal licence issuing authority, if any]

 signed

Gul Mohammad name (please print)

9/9/2020 dated