## **CITY** OF WOLVERHAMPTON COUNCIL

Licensing Services, 2<sup>nd</sup> Floor, Civic Centre, St. Peter's Square, Wolverhampton, WV1 1SH

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 SAMUEL EUANS
(full name(s) of 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

NA - NOT RECIEVED

Part 1 - Premises details

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

DANIEL SMITH BUILDING POUNTNEY STREFT

WOLVERHAMPTON WUZ 4HX

Post town

Post code (if known)

WOLVERHAMPTON

WVZ

444

Telephone number (if any)

Description of premises (please read guidance note 1)

FUENTS VENUE

DARIA LIKE CADONICA HAND		
MARIA LEE CLOOPERHAM.		
Nationality		
BFILICH.		
Place of birth  Nowether from		
CONTRACTOR OF THE PROPERTY OF		
Date of birth		
19/10/16,	PEAR PRO	
Personal licence number of proposed designated premises ssuing authority of that licence (if any)		
RCR 620 - NOWERHANDE	ON CITY	
ull name of existing designated premises supervisor (if ar		
and the state of t	Please tick y	es
would like this application to have immediate effect under ection 38 of the Licensing Act 2003		
nave enclosed the premises licence or relevant part of it	(IV	/
you have not enclosed the premises licence, or relevant part	of it, please give	
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I have made or enclosed payment of the fee  I will give a copy of this application to the chief officer of supervisor	Please tick	ye
I have made or enclosed payment of the fee   I will give a copy of this application to the chief officer of supervisor   I have enclosed the premises licence or relevant part of the fee   I will give a copy of this application to the chief officer or supervisor   I have enclosed the premises licence, or relevant part of the fee   I will give a copy of this application to the chief officer or supervisor   I have enclosed the premises licence, or relevant part of the fee	Please tick	ye
I have made or enclosed payment of the fee  I will give a copy of this application to the chief officer of supervisor	Please tick of police oposed premises of it or explanation	ye

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 TO 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.

Part 3 - Signatures (please read guidance note 2)

	griatures (picase i		
Signature (See guida capacity.	of applicant or appling note note 3). If signing	licant's soli ng on behal	citor or other duly authorised agent f of the applicant please state in what
Signature			
Date	30/11/18		
Capacity	MANACING	DIRECT	70C
authorised	oplicants signature agent (please read blease state in wha	guidance n	licant 2 <sup>nd</sup> applicant's solicitor or other ote 4). If signing on behalf of the
Date			
Capacity			
Contact nai	me (where not pre lence associated v	viously giv with this ap	en) and postal address for oplication (please read guidance note 5)
Post town			Post Code

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

## CITY OF WOLVERHAMPTON C O U N C I L

Licensing Services, 2<sup>nd</sup> Floor, Civic Centre, St. Peter's Square, Wolverhampton, WV1 1SH Consent of individual to being specified as premises supervisor

1 DECH CLOODESHIFT.
[full name of prospective premises supervisor]
of
[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
1 200
VATINION OF DRS
[type of application]
by
and was for to was
SANGE COANS OF HANGE CKNTS VENUE
[name of applicant]
relating to a premises licence [number of existing licence, if any]
(number of existing licence, if any)
for
KHE HAVAN EVENTS VENDE
BANKL SMAH SULLDING.
POURTHUT ST.
~ 12 1 1 1 1 V

[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
SANULL CUCHS CO HANGAR GUENS VENUE.
concerning the supply of alcohol at
THE HARAGER GIGER VENUE
DANIEL SMITH BUILDING.
QUATUEN ST.
205 AHX.
[name and address of premises to which application relates]
I also confirm that I am entitled to work in the United Kingdom and 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
MONSERHAMPON CITY COUNCIL.
[insert name and address and telephone number of personal licence issuing authority, if any]
Signed
Signed
Name (please print) CYPECHMAN.
Date Z