Application to vary a premises license 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 Euro Business & Property Brokers Ltd (full name(s) of premises licence holder)

being the premises license holder, apply to vary a premises license to specify the individual named in this application as the premises supervisor under Section 37 of the Licensing Act 2003

Premises licence number

PLA0090

Part 1 - Premises details

Postal address of premises of description	or, if none, ordinance survey map reference or
Crown 46-48 Chapel Street Chorley Lancashire PR7 1BY	
Post Town	Postcode
Chorley	PR7 1BY
Telephone number (if any)	

Description of premises (please read guidance note 1)

The premises operates as a Public House in Chorley

Appendix 1

Part 2

Full name of proposed designated premises supervisor

George David Ikin

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

PA0500

Chorley Borough Council Licensing Authority

Full name of existing designated premises supervisor (if any)

Sheila Davis

Please tick Yes

I would like this application to have immediate effect under Section 38 of the Lice	nsing
Act 2003	\checkmark
I have enclosed the premises license or relevant part of it	$\mathbf{\Lambda}$

I have enclosed the premises license 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

The licence is currently with	TLT Solic	itors.	We have	spoken	to them	and they are
forwarding to us as soon as	possible.	Once	received,	, we will	forward	to the council
asap.						

e tick ' Yes
\square
\square
\square
\checkmark
\checkmark

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 [£5000], UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Appendix 1

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	tellall
Date	05/10/2011
Capacity	LICENSING ASSISTANT
authorised a	blications, signature of 2 nd applicant or 2 nd applicant's solicitor or other agent. (Please read guidance note 4). If signing on behalf of the applicant in what capacity.
Signature	
Date	
Capacity	
	e (where not previously given) and postal address for correspondence associated ication (please read guidance note 5)
Amy Hall Flint Bishop L St. Michael`s St. Michael`s Derby	Court
DE1 3HQ Telephone nu	umber (if any) 01332 340 211
lf you would p	prefer us to correspond with you by e-mail your e-mail address (optional)

amy.hall@flintbishop.co.uk

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.

Appendix 1

Consent of individual to being specified as premises supervisor
I
of 18 FORSYTHIA DEIVE
CHORLEY
In the premises supervisor]
hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for
CHANGE OF DPS. [type of application]
by the BUSINESS + PROPERTY BLOGES LTD[name of applicant]
relating to a premises licence
for CRONN
46-48 CHAPEL STREET.
[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 EURO BUSINESS + PROPERTY BLOKERS CTOPname of applicant]
concerning the supply of alcohol at
46-48 CHAPPLI SPREET
[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
Personal licence issuing authority <u>CHORVEY</u> BOLOUGH COUNCIL [insert name and address and telephone number of personal licence issuing authority, if any]
a.uk. 20191 (please print)
Giller name (please print)
30(g/u