SCHEDULE

Regulation 2(2)

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.

/ we
(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

Part 1 – Premises details	
Postal address of premises or, if none, Ordnance Survey description	map reference or
Post town	Post code (if known)
Telephone number (if any)	
Description of premises (please read guidance note 1)	

Part 2- Proposed supervisor details

Full name of proposed designated premises supervisor
Nationality
Nationality
Place of birth
Place of birth
la com
Date of birth
Description of many of the least described associated a
Personal licence number of proposed designated premises supervisor and issuing
authority of that licence (if any)
Fellows Audalou de lanche de mande de la companya d
Full name of existing designated premises supervisor (if any)
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	Please tic	k yes
l woul	d like this application to have immediate effect under	
sectio	n 38 of the Licensing Act 2003 (please read guidance note 2)	
l 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)		
Reaso	ns why I have failed to enclose the premises licence or relevant part of i	t
	Please tic	vec.
	I have made or enclosed payment of the fee	
•	I will give a copy of this application to the chief officer of police (please read guidance note 3)	
•	I have enclosed the consent form completed by the proposed premises supervisor	
•	I have enclosed the premises licence, or relevant part of it or explanation	
٠	I will notify the existing premises supervisor (if any) of this application (please read guidance note 4)	
•	I understand that if I do not comply with the above requirements my application will be rejected	

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Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO KNOWINGLY OR RECKLESSLY 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 A VALID LEAVE TO ENTER OR REMAIN IN THE UK OR AN ADULT WHO IS SUBJECT TO CONDITIONS WHICH WOULD PREVENT THAT PERSON FROM TAKING UP 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 BY VIRTUE OF THEIR IMMIGRATION STATUS.

Part 3 – Signatures (please read guidance note 5)		
Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 6). If signing on behalf of the applicant please state in what capacity.		
Signature		
Date		
Capacity		
For joint applicants signature of 2 nd applicant, 2 nd applicant's solicitor or other authorised agent (please read guidance note 7). If signing on behalf of the applicant please state in what capacity.		
Signature		
Date		
Capacity		
···		
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 8)		
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)		

Guidance notes

- 1. Describe the premises. For example the type of premises it is.
- 2. An application to vary a premises licence so as to name a different premises supervisor may be given immediate effect (that is, from the time that the application is received by the licensing authority) if the premises licence holder requests it at the time he makes an application under section 37. Section 38 enables the holder of a premises licence to continue the supply of alcohol if, for example, the existing premises supervisor is suddenly indisposed or unable to work. If the application is rejected, the licence reverts to the form it took before the application was made
- A full copy of the application form must be sent to the chief officer(s) of
 police for the police area(s) in which the premises are situated. The
 notice should state whether section 38 of that Act (circumstances in
 which section 37 application given interim effect) applies to the
 application.
- 4. Section 37(4)(b) of the Licensing Act 2003 requires the premises licence holder to notify the existing designated premises supervisor (if any) about this application. It is sufficient for the licensee to inform the existing premises supervisor in writing, without the need to share the specific details of the application. The notice should state whether section 38 of that Act (circumstances in which section 37 application given interim effect) applies to the application.
- 5. The application form must be signed.
- An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have authority to do so.
- Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- This is the address which we shall use to correspond with you about this application.