

SOUTH LAKELAND DISTRICT COUNCIL

Licensing Section, South Lakeland House, Lowther Street, Kendal, Cumbria, LA9 4UD

Tel: (01539) 733333 Ext 7481/7484 Fax: (01539) 737659

www.southlakeland.gov.uk e-mail: licensing@southlakeland.gov.uk



Part A

Consent of individual to being specified as premises supervisor

I[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.....[type of application]
by[name of applicant]
relating to a premises licence[number of existing licence, if any]
for.....
..... [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[name of applicant]
concerning the supply of alcohol at
.....[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
[insert name and address and telephone number of personal licence issuing authority, if any]

.....signed
.....name (please print)
.....dated

PART B

Consent of premises licence holder to transfer

I/we[full name of premises licence holder(s)]
the premises licence holder of premises licence number.....[insert premises licence number] relating to.....
.....[name and address of premises to which the application relates] hereby give my consent for the transfer of premises licence number[insert premises licence number]
to[full name of transferee].

.....signed
.....name (please print)
.....dated