

Consent of individual to being specified as premises supervisor

[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]
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]
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]
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]
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]
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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]
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
[name of applicant] relating to a premises licence [number of existing licence, if any]
[name of applicant] relating to a premises licence [number of existing licence, if any]
[name of applicant] relating to a premises licence [number of existing licence, if any]
relating to a premises licence
relating to a premises licence
[number of existing licence, if any]
for
[name and address of premises to which the application relates]

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Return form to: Licensing Section, Jubilee Stores, The Quay, Newport, Isle of Wight, PO30 2EH



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 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
[insert name and address and telephone number of personal licence issuing authority, if any]
Signed
Name (please print)
Date

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