



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:

(existing licence number, 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 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	Personal licence issuing Authority
<input type="text"/>	<input type="text"/>

Signed:

Dated:

Once you have completed this form, please save it and upload at the link below:

www.southhams.gov.uk/licensing-application

www.westdevon.gov.uk/licensing-application