

VARIATION APPLICATION TO CHANGE THE PREMISES MANAGER

PART II OF THE LONDON LOCAL AUTHORITIES ACT 1991

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

- i) Before completing this form please read the guidance notes at the end of the form; and
- ii) If you are completing this form by hand please write CLEARLY, in block capitals and using BLACK ink.
- iii) The application and all documents must be sent to: Licensing Partnership, P.O Box 182, Sevenoaks, Kent, TN13 1GP. Telephone: 01732 227004 or Email: licensing@sevenoaks.gov.uk

1. Full Name of Licence Holder	
2. Name & Address of Licensed Premises	
Trading Name:	
Address:	
Post Code:	
Licence Number:	
3. Detail of the New 'Premises Manager'	
One identical passport size and quality photographs, taken within the last months, of the individual named as the 'Premises Manager', together with this individuals consent to being the 'Premises Manager', must accompany this application (see Note 1)	
Title:	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> (please state):
Surname:	
Forenames:	
Home Address:	
Post Code:	
Email:	
Home Phone Number:	Personal Mobile Number:
National Insurance Number:	
Date of Birth:	Place of Birth (Town & Country e.g. Bexley, UK):
Will the new 'Premises Manager' be responsible for the day to day management of the premises with immediate effect?	
Tick as appropriate Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, what day will they take over responsibility for the day to day management of the premises?	

Will the new 'Premises Manager' be providing 'licensable special treatments' at the premises?

Tick as appropriate

Yes

No

If yes, please tick to confirm that the appropriate application to add them to the Licence as an 'additional practitioner' has been made and provide the date of this application. (see Note 3)

Date of application :

4. Entitled to Work in the UK

Please tick to confirm that you are satisfied that the new 'Premises Manager' is legally entitled to work in the UK.

The Government has issued guidance on 'how to carry out right to work checks' and 'what documents you can accept', both of which are on the website GOV.UK. You can access these documents via the following link: <https://www.gov.uk/legal-right-work-uk>

5. Outgoing Premises Manager

Is the individual currently named on the Licence as the 'Premises Manager' also listed in Annex A to the Licence as providing the 'licensable special treatments' at the premises?

Tick as appropriate

Yes

No

If yes, do you want them to remain on Annex A to the Licence as a practitioner?

Tick as appropriate

Yes

No

6. The Documentation set out below must accompany this application

Tick to confirm provided

- One identical passport size and quality photographs, taken within the last month, of the person named in the application as the 'Premises Manager' and their name printed on the back of it (see Note 1)
- Consent of the person named in the application as the 'Premises Manager' (see Note 2)
- The correct fee

Cheques should be payable to Sevenoaks District Council. Alternatively you can call the Licensing Partnership on 01732 227004 and pay by either credit or debit card over the telephone.

- The Licence document (including Annex A) issued by the Council in respect of the premises detailed in section 2 of this application

If you are not returning the Licence document with this application, please give the reason why below:

7. Bodies that you must send a copy of this application to.

You are **required**, on the day you submit this application to the Council, to send a copy of it to:

- The Commissioner of Police;
- The London Fire Brigade; and
- The Council's Trading Standards Service

Failure to comply with this requirement may prevent consideration of your application.

You should send a copy of this application to:

- Metropolitan Police (Licensing), Civic Offices, 2 Watling Street, Bexleyheath, Kent DA6 7AT
- Bexley Borough Commander, Fire Safety Regulation, South East Area 3, 169 Union Street, London SE1 0LL
- Trading Standards Service (special treatment licensing), Civic Offices, 2 Watling Street,

Tick to confirm copy sent

8. Contact in respect of the Application

Please tell us who you want us to communicate with about this application. This is also the person and address to which the amended Licence document will be sent.

Title: Mr Mrs Miss Ms Other (please state):

Surname:

Forenames:

Address:

Postcode:

Contact Telephone Number:

Email:

If not the applicant, the relationship to the applicant (e.g. Solicitor, Agent, Friend):

9. This Declaration must be signed by the Licence Holder (see Note 4)

I declare that the information contained in this application is true and accurate to the best of my knowledge and belief.

I understand that the Licensing Partnership may consult other agencies about my suitability to hold a licence to hold a Special Treatment Premises Licence; which will include other Local Authorities, the Metropolitan Police and the London Fire Brigade.

I understand that the information I have provided may be shared and that such information may extend to personal data. I also understand that my details may be included on the Council's register of 'licensed special treatment premises'. I hereby consent to this processing of my data and display of relevant information on the public register.

Local Authorities must protect funds it handles and so the information you have provided on this form may be used to detect and prevent fraud. The information may also be shared for the same purposes, with other organisations which handle public funds including data to be used as part of the National Fraud Initiative. Your personal data will also be shared with the local authorities, which make up the Licensing Partnership, for the purpose of processing your licensing application. Your personal data will not be used for any other purpose without your prior consent, except as permitted under the Data Protection Act 2018. For further information, please see

<https://www.gov.uk/government/collections/national-fraud-initiative>

Signature:

Date:

Print Name:

Notes

1. One passport size and quality photograph, taken within the last month, of all persons named in question 10 as providing 'special treatments' at the premises **must** accompany the application. The Practitioners name must be printed on the reverse side of each photograph. Failure to provide satisfactory photographs will result in the application being rejected. The photograph can be provided in digital format or any other means provided it meets the acceptable standards detailed below.

To be accepted the photographs must be:

- the standard size used in photo booths in the UK (which is 45 mm high x 35mm wide); and not be a cut down version of a larger picture;
- printed to a professional standard;
- taken within the last month;
- in colour on plain white photographic paper with no border;
- taken against a plain cream or light grey background;
- clear and in focus;
- without any creases or tears
- marked on reverse with the individuals full name;
- unaltered by computer software;
- a close-up of the individuals full head and upper shoulders; and
- in clear contrast to the background.

Photographs **must not** contain other objects or people and the individual in the photograph **must be** facing forward and looking straight at the camera.

2. The individual named as the 'Premises Manager' in section 3 **must** complete the form entitled 'Premises Manager - Consent'; and this form **must** accompany the application. Failure to supply this form will result in the application being rejected.
3. If the individual named as the 'Premises Manager' in section 3 is also going to provide licensable special treatments at the premises this individual **must** be added to the list of practitioners set out on Annex A to the Licence. To do this the Licence Holder must make a separate application so as to vary their Licence to include the new Premises Manager to the list of practitioners set out in Annex A to the Licence.
4. The application **must** be signed by the Licence Holder, this is the individual named on the Licence; or in respect of a Licence held by a Partnership, any one of the Partners as named on the Licence; or in respect of a Licence held by a Company, the Company Secretary or any Director of the Company named on the Licence.