

**Request to be removed 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 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.

I ..... (full name of Designated Premises Supervisor) being the Designated Premises Supervisor, notify the Licensing Authority of my wish to cease being the Designated Premises Supervisor under Section 41 of the Licensing Act 2003.

Premises Licence number (if known)

**Part 1 – Premises Details**

Postal address of Premises or, if none, ordnance survey map reference or description

Post town

Post code

Telephone number (if any)

Description of Premises (please read guidance note 1)

## Part 2

Full name & address of outgoing Designated Premises Supervisor

Personal Licence Number:

Issuing Authority:

**NOTE: Please complete Section A if you are the Premises Licence Holder - if not, please complete Section B.**

### Section A

Please tick ✓ yes

I have enclosed the Premises Licence or relevant part.

**OR**

I have provided reasons why I have failed to enclose the premises licence or relevant part.

I am aware that, under Section 56, paragraph 2-4 of the Licensing Act 2003, it is a relevant offence if I fail, without reasonable excuse, to comply with the requirement to produce my existing licence.

I understand that if I do not comply with the above requirements my notification will be rejected.

Reasons why I have failed to enclose the Premises Licence or relevant part of it

### Section B

Please tick ✓ yes

I am **not** the Premises Licence Holder.

I have sent a copy of this notice to the Premises Licence Holder.

I have directed the Premises Licence Holder to send the Premises Licence or relevant part to the Licensing Authority within **14 days**.

Reasons why I have failed to send a copy of this notice to the Premises Licence Holder and direct him/her to send the Premises Licence or relevant part to the Licensing Authority within 14 days.

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 3 – Signatures** (please read guidance note 2)

**Signature of Outgoing Designated Premises Supervisor**

Signature .....

Date .....

**Contact Name (where not previously given) and address for correspondence associated with this application** (please read guidance note 3)

**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)**

**Notes for guidance**

1. Describe the Premises. For example the type of Premises it is.
2. The application form must be signed.
3. This is the address which we shall use to correspond with you about this application.
4. Where relevant, ensure the template is completed and sent to the Premises Licence Holder.