

Crawley

Application to vary a premises licence to specify an individual as designated premises supervisor Licensing Act 2003

For help contact

licensing@crawley.gov.uk
Telephone: 1293438000

\* required information

Section 1 of 4						
You can save the form at any time and resume it later. You do not need to be logged in when you resume.						
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.				
<ul><li>No</li></ul>		Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.				
Applicant Details						
* First name						
* Family name						
* E-mail						
Main telephone number		Include country code.				
Other telephone number						

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Your position in the business	Licensing Coordinator	
		The country where the headquarters of your
Home country	United Kingdom	business is located.
Registered Address		Address registered with Companies House.
Building number or name	3	
Street	Monkspath Hall Road	
District		
City or town	Solihull	
County or administrative area		
Postcode	B90 4SJ	
Country	United Kingdom	
Section 2 of 4		
PREMISES DETAILS		

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Public house		
Section 3 of 4		
SUPERVISOR		
Full Name Of Proposed Design	gnated Premises Supervisor	
* First name		
* Family name		
* Nationality		
* Place of birth		

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How will the consent form of the proposed designated premises supervisor be supplied to the authority?	

OFFICE USE ONLY		