

Appendix A



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

For help contact
Licensing@portsmouthcc.gov.uk
Telephone: 023 9283 4073

* 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.

Your reference

SOUTHSEA.22.11.2018

You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.

Are you an agent acting on behalf of the applicant?

☐ Yes ☒ No

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

Matthew

* Family name

Chapman

* E-mail

operations@brewhouseandkitchen.com

Main telephone number

[REDACTED]

Include country code.

Other telephone number

[REDACTED]

☐ Indicate here if you would prefer not to be contacted by telephone

Are you:

- ☒ Applying as a business or organisation, including as a sole trader
☐ Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

Applicant Business

Is your business registered in the UK with Companies House?

☒ Yes ☐ No

Note: completing the Applicant Business section is optional in this form.

Registration number

07769260

Business name

brewhouse and kitchen limited

If your business is registered, use its registered name.

VAT number

GB

[REDACTED]

Put "none" if you are not registered for VAT.

Legal status

Private Limited Company

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Your position in the business

Home country

The country where the headquarters of your business is located.

Registered Address

Address registered with Companies House.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Section 2 of 4

PREMISES DETAILS

I/we apply to vary a premises licence to specify the individual named in this application as the premises supervisor under section 37 of the Licensing Act 2003.

* Premises licence number

Are you able to provide a postal address, OS map reference or description of the premises?

☒ Address ☐ OS map reference ☐ Description

Address

* Building number or name

* Street

District

* City or town

County or administrative area

Postcode

* Country

Contact Details

E-mail

Telephone number

Other telephone number

Describe the premises. For example, what type of premises it is

Continued from previous page...

public house

Section 3 of 4

SUPERVISOR

Full Name Of Proposed Designated Premises Supervisor

* First name

* Family name

* Nationality

* Place of birth

* Date of birth / /

Personal licence number of proposed designated premises supervisor

Issuing authority of that licence

Full Name Of Existing Designated Premises Supervisor

First name

Family name

* Would you like this application to have immediate effect under section 38 of the Licensing Act 2003?

☒ Yes ☐ No

☒ I will notify the existing premises supervisor (if any) of this application

* Will the premises licence or relevant part of it be submitted with this application?

☒ Yes ☐ No

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

☐ Electronically, by the proposed designated premises supervisor

☒ As an attachment to this variation

The premises licence holder can continue the supply of alcohol if, for example, the existing premises supervisor is suddenly indisposed or unable to work.

It is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application.

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Reference number for consent
form (if known)

n/a

If the consent form is already submitted, ask
the proposed designated premises
supervisor for its 'system reference' or 'your
reference'

Section 4 of 4

PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

This formality requires a fixed fee of £23

DECLARATION

- * I/we understand 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.
- * 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.

☒ Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
behalf of the applicant?"

* Full name

Matthew Chapman

* Capacity

general manager

* Date

22 / 11 / 2018
dd mm yyyy

Remove this signatory

Full name

Gratiane Lainey

Capacity

Ops admin

* Date

22 / 11 / 2018
dd mm yyyy

Remove this signatory

Add another signatory

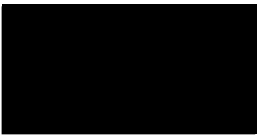
OFFICE USE ONLY

Applicant reference number	<input type="text" value="SOUTHSEA.22.11.2018"/>
Fee paid	<input type="text"/>
Payment provider reference	<input type="text"/>
ELMS Payment Reference	<input type="text"/>
Payment status	<input type="text"/>
Payment authorisation code	<input type="text"/>
Payment authorisation date	<input type="text"/>
Date and time submitted	<input type="text"/>
Approval deadline	<input type="text"/>
Error message	<input type="text"/>
Is Digitally signed	<input type="checkbox"/>

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Consent of individual to being specified as premises supervisor

I Matthew John Chapman
[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

Transfer of the designated premises supervisor
[type of application]

by

Brewhouse and Kitchen limited
[name of applicant]

relating to a premises licence 18/03325/LAPREM
[number of existing licence, if any]

for

Brewhouse and Kitchen Southsea
51 Southsea Terrace
PO5 3AU
Hants
Southsea

[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

Brewhouse and Kitchen limited

[name of applicant]

concerning the supply of alcohol at

**Brewhouse and Kitchen Southsea
51 Southsea Terrace
PO5 3AU
Hants
Southsea**

[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



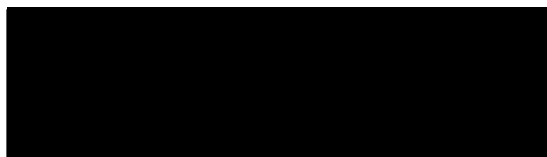
[insert personal licence number, if any]

Personal licence issuing authority

Brighton and Hove City Council

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

M. CHAPMAN

Date

22/11/18.