

Rushcliffe Arena, Rugby Road, West Bridgford, Nottingham NG2 7YG

Consent of individual to being specified as premises supervisor

| I | |
|---|--|
| [full name of prosp | ective premises supervisor] |
| of | |
| [home address of prospective premises supervisor] | |
| | give my consent to be specified as the designated premises supervisor in relation to |
| [type of application] | |
| by | |
| [name of applicant] | |
| relating to a premises | licence [number of existing licence, if any] |
| for | |
| [name and address of premises to which the application relates] | |
| and any premises lice [name of applicant] | ence to be granted or varied in respect of this application made by |
| concerning the | |
| concerning the supply of alcohol at | |
| [name and address of premises to which application relates] | |

1

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

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

Signed

Name (please print)

Date