



Licensing Team
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Licensing Team (Temple Street), Bristol City Council, PO Box 3176, BRISTOL BS3 9FS

Consent of individual to being specified as the premises supervisor

I _____
[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

Variation Designated Premises Supervisor

_____ *[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 licence to be granted or varied in respect of this application made by

[name of applicant]

concerning the supply of alcohol at

[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 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 or personal licence issuing authority, if any]

Signed

Name (please print)

Date

Data Protection Privacy Notice:

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https://www.bristol.gov.uk/en_US/about-our-website/privacy