Continued from previous page			
Applicant's position in the business			
Home country	United Kingdom	The country where the applicant's headquarters are.	
Registered Address		Address registered with Companies House.	
Building number or name	Jamestown Wharf		
Street	32 Jamestown Road		
District			
City or town	London		
County or administrative area			
Postcode	NW1 7HU		
Country	United Kingdom		
Agent Details			
* First name	Squire Patton Boggs (UK) LLP		
* Family name angela.hackett@squirepb.com			
You must enter a valid e-mai	l address		
* E-mail	01212223325		
Main telephone number		Include country code.	
Other telephone number			
☐ Indicate here if you would	ld prefer not to be contacted by telephone		
Are you:			
 An agent that is a business or organisation, including a sole trader 		A sole trader is a business owned by one person without any special legal structure.	
 A private individual actir 	ng as an agent	person without any special legal structure.	
Agent Business			
Is your business registered in Yes No the UK with Companies House?		Note: completing the Applicant Business section is optional in this form.	
Registration number	OC335584		
Business name	Squire Patton Boggs (UK) LLP	If your business is registered, use its registered name.	
VAT number GB	74718320	Put "none" if you are not registered for VAT.	
Legal status	Limited Liability Partnership		

Continued from previous page		7
Your position in the business		The country where the headquarters of your
Home country	United Kingdom	business is located.
Agent Registered Address		Address registered with Companies House.
Building number or name	Premier Place 2&A Half	
Street	Devonshire Square	
District		
City or town	London	
County or administrative area		
Postcode	EC2M 4UJ	
Country	United Kingdom	
Section 2 of 4		
PREMISES DETAILS		
I/we apply to vary a premises li section 37 of the Licensing Act	cence to specify the individual named in this ap 2003.	oplication as the premises supervisor under
* Premises licence number	14/01561/LAPER	
Are you able to provide a posta	al address, OS map reference or description of t	he premises?

Continued from previous page		
Airport		
Section 3 of 4		
SUPERVISOR		
Full Name Of Proposed Desig	nated Premises Supervisor	

Continued from previous page Reference number for consent form (if known)	
If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'	
Section 4 of 4	