If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use

Part 2 - Proposed supervisor details

Full name of proposed designated premises supervisor

Nationality

Place of birth

Date of birth

Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)

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I understand that if I do not comply with the above requirements my application will be rejected

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5) Kate Bull TLT Solicitors One Redcliff Street

Post town