



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

For help contact  
[licensing@crawley.gov.uk](mailto:licensing@crawley.gov.uk)  
 Telephone: 1293438000

\* 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.

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

[Redacted]

\* Family name

[Redacted]

[Redacted]

[Redacted]

[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

03858150

Business name

Crawley Town Football & Social Club Ltd

If your business is registered, use its registered name.

VAT number

- 725117554

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**

Building number or name

Street

District

City or town

County or administrative area

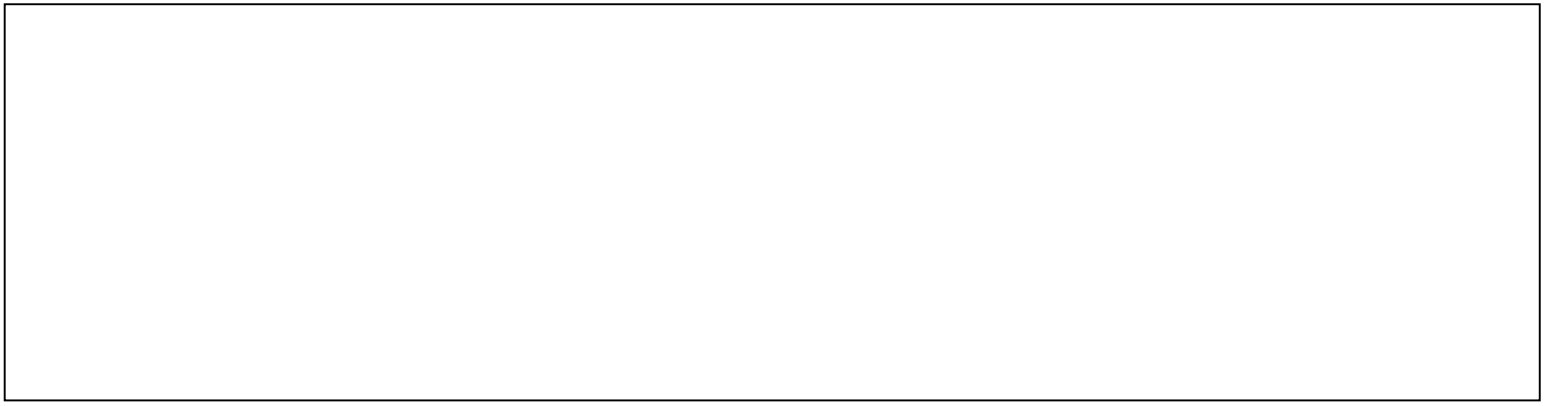
Postcode

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Stadium Suite at Football Stadium (Crawley Town Football Club)

**Section 3 of 4**

**SUPERVISOR**



**OFFICE USE ONLY**

Applicant reference number	<input type="text" value="05/00102/LAPRE"/>
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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