



Clerk: Kay Heywood
Telephone: 01803 207013
E-mail address: governance.support@torbay.gov.uk
Date: Thursday, 23 July 2015

Governance Support
Town Hall
Castle Circus
Torquay
TQ1 3DR

Dear Member

LICENSING SUB-COMMITTEE - THURSDAY, 30 JULY 2015

I am now able to enclose, for consideration at the Thursday, 30 July 2015 meeting of the Licensing Sub-Committee, the following reports that were unavailable when the agenda was printed.

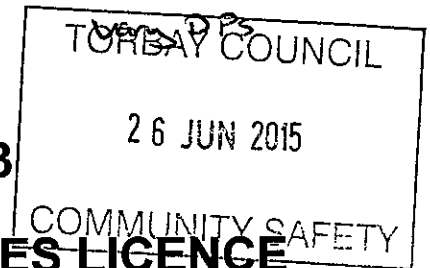
Agenda No	Item	Page
6.	Licensing Act 2003 – An application for a Variation to a Premises Licence to Specify an Individual as the Premises Supervisor of O Pescador, 12 Victoria Parade, Torquay TQ1 2BB	(Pages 8 - 14)

Yours sincerely

Kay Heywood
Clerk



£23.00



LICENSING ACT 2003

**APPLICATION TO VARY PREMISES LICENCE
TO SPECIFY AN INDIVIDUAL AS
DESIGNATED PREMISES SUPERVISOR**

NOTIFICATION

Information held by Torbay Council complies with and is held in accordance with the UK Data Protection Act 1998. The information that you provide on this form will only be used for this application form and will only be disclosed where necessary under any applicable legislation.

Information may also be shared for the prevention and detection of crime, for example with the police and other agencies as required by law, such as the Audit Commission under the National Fraud Initiative data matching exercise.

You have a right of access to your personal information. If you wish to access your personal information or exercise any of your rights under the legislation then please contact Torbay Council's Information Governance team on 01803 20 7467. Further information can be found on the Information Governance pages on Torbay Council's Internet site at, www.torbay.gov.uk

Completed forms should be returned to:

**Environmental Health Manager (Commercial)
Torbay Council
Community Safety
C/O Torquay Town Hall
Castle Circus
Torquay
TQ1 3DR**

Contact Details:

Tel: 01803 208025

Web: www.torbay.gov.uk

Email: licensing@torbay.gov.uk



Application to vary a premises licence to specify an individual as designated premises supervisor under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. 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 additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I / we EDUARDO GOMES
 (full name(s) of premises licence holder)

being the premises licence holder, apply to vary a premises licence to specify the individual named in this application as the premises supervisor under section 37 of the Licensing Act 2003

Premises licence number

PL0826

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description

O PESCADOR
12 - 12A VICTORIA PARADE

Post town

TORQUAY

Post code (if known)

TQ1 2BB

Telephone number (if any)

Description of premises (please read guidance note 1)

SEAFOOD & TAPAS RESTAURANT

Part 2

Full name of proposed designated premises supervisor

EDUARDO GOMES

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

00377 - LAMBETH COUNCIL

Full name of existing designated premises supervisor (if any)

Please tick yes

I would like this application to have immediate effect under section 38 of the Licensing Act 2003

I have enclosed the premises licence or relevant part of it

(If you have not enclosed the premises licence, or relevant part of it, please give reasons why not)

Reasons why I have failed to enclose the premises licence or relevant part of it

NO LICENCE LEFT



Please tick yes

- I have made or enclosed payment of the fee
- I will give a copy of this application to the chief officer of police
- I have enclosed the consent form completed by the proposed premises supervisor
- I have enclosed the premises licence, or relevant part of it or explanation
- I will give a copy of this form to the existing premises supervisor, if any
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 3 – Signatures (please read guidance note 2)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 3). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

For joint applicants signature of 2nd applicant 2nd applicant's solicitor or other authorised agent (please read guidance note 4). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

Guidance notes

1. Describe the premises. For example the type of premises it is.
2. The application form must be signed.
3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
5. This is the address which we shall use to correspond with you about this application.



LICENSING ACT 2003

CONSENT

OF INDIVIDUAL TO BEING SPECIFIED

AS PREMISES SUPERVISOR

NOTIFICATION

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Castle Circus
Torquay
TQ1 3DR

Contact Details:

Tel: 01803 208025

Web: www.torbay.gov.uk

Email: licensing@torbay.gov.uk

Consent of individual to being specified as premises supervisor

I EDUARDO GOMES
[full name of prospective premises supervisor]

of 12- 12A VICTORIA PARADE, TORQUAY TQ1 2BB

[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

VARY DPS APP
[type of application]

by EDUARDO GOMES
[name of applicant]

relating to a premises licence PL 0826
[number of existing licence, if any]

for 0 PESCADOR, 12- 12A VICTORIA PARADE, TORQUAY TQ1 2BB

[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

EDUARDO GOMES
[name of applicant]

concerning the supply of alcohol at

0 PESCADOR, 12- 12A VICTORIA PARADE, TORQUAY TQ1 2BB

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number 00377

[insert personal licence number, if any]

Personal licence issuing authority

.....
.....
.....

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

Signed

Name (please print) EDUARDO GOMES

Date 24/06/15