

Appendix 11

* required information

Section 1 of 7

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.

Your reference

You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.

Are you an agent acting on behalf of the applicant?

☐ Yes ☒ 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

jade

* Family name

mulley

* E-mail

Main telephone number

Include country code.

Other telephone number

☐ 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.

Continued from previous page...

Your Address

Address official correspondence should be sent to.

* Building number or name	<input type="text"/>
* Street	<input type="text"/>
District	<input type="text"/>
* City or town	<input type="text"/>
County or administrative area	<input type="text"/>
* Postcode	<input type="text"/>
* Country	<input type="text" value="United Kingdom"/>

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PREMISES DETAILS

I/we, as named in section 1, apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in section 2 below.

Premises Licence

* Premise licence number

Name Of Current Premises Licence Holder

* Name

Premises Address

Are you able to provide a postal address, OS map reference or description of the premises?

☒ Address ☐ OS map reference ☐ Description

Building number or name	<input type="text" value="20"/>
Street	<input type="text" value="vine place"/>
District	<input type="text"/>
City or town	<input type="text" value="sunderland"/>
County or administrative area	<input type="text"/>
Postcode	<input type="text" value="sr13na"/>
Country	<input type="text" value="United Kingdom"/>

Further Details

Please give a brief description of the premises

<input type="text" value="bar / nightclub"/>
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Continued from previous page...

Telephone number at the premises if any

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APPLICATION DETAILS

In what capacity are you applying for the premises licence to be transferred to you?

- ☒ An individual or individuals
- ☐ A limited company/limited liability partnership
- ☐ A partnership (other than limited liability)
- ☐ An unincorporated association
- ☐ A recognised club
- ☐ A charity
- ☐ The proprietor of an educational establishment
- ☐ A health service body
- ☐ A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- ☐ A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- ☐ The chief officer of police of a police force in England and Wales
- ☐ Other (for example a statutory corporation)

Please confirm the following:

- ☐ I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
- ☐ I am making the application pursuant to a statutory function
- ☐ I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative

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INDIVIDUAL APPLICANT DETAILS

Applicant Name

Is the name the same as (or similar to) the details given in section one?

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

☒ Yes

☐ No

First name

jade

Family name

mulley

Continued from previous page...

Is the applicant 18 years of age or older?

☐ Yes ☐ No

Applicant Postal Address

Is the address the same as (or similar to) the address given in section one?

☒ Yes ☐ No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Applicant Contact Details

Are the contact details the same as (or similar to) those given in section one?

☒ Yes ☐ No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

E-mail

Telephone number

Other telephone number

* Date of birth

 / /

* Nationality

Right to work share code

Right to work share code if not submitting scanned documents

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FURTHER INFORMATION

Are you the holder of the premises licence under an interim authority notice?

☐ Yes ☒ No

Do you wish the transfer to have immediate effect?

☒ Yes ☐ No

Continued from previous page...

Have you attached the consent form signed by the existing premises licence holder?

☐ Yes ☒ No

Please enter your reasons. What steps have you taken to obtain consent?

mr john kerr is ready to sign it over
mr paul row cant get hold of him

If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003)?

☒ Yes ☐ No

Have you attached the previous licence?

☐ Yes ☒ No

Please enter your reasons

waiting for a copy from sunderland city council

Section 6 of 7

NOTES ON DEMONSTRATING ENTITLEMENT TO WORK IN THE UK

Continued from previous page...

If the document is not a passport, a copy of the whole document should be provided.

Your right to work will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with this guidance.

Home Office online right to work checking service

As an alternative to providing a copy of the documents listed above, applicants may demonstrate their right to work by allowing the licensing authority to carry out a check with the Home Office online right to work checking service.

To demonstrate their right to work via the Home Office online right to work checking service, applicants should include in this application their 9-digit share code (provided to them upon accessing the service at <https://www.gov.uk/prove-right-to-work>) which, along with the applicant's date of birth (provided within this application), will allow the licensing authority to carry out the check.

In order to establish the applicant's right to work, the check will need to indicate that the applicant is allowed to work in the United Kingdom and is not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

An online check will not be possible in all circumstances because not all applicants will have an immigration status that can be checked online.

The Home Office online right to work checking service sets out what information and/or documentation applicants will need in order to access the service. Applicants who are unable to obtain a share code from the service should submit copy documents as set out above.

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

This formality requires a fixed fee of £23

DECLARATION

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name

miss jade mulley

* Capacity

300

* Date

27 / 07 / 2021
dd mm yyyy

Add another signatory

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/sunderland/change-3> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

Consent of premises licence holder to transfer

I/we Mr John Kerr
[full name of premises licence holder(s)]

the premises licence holder of premises licence number 000M PREM 00798
[insert premises licence number]

relating to

20 Vine Place SR13NA
[name and address of premises to which the application relates]

hereby give my consent for the transfer of premises licence number

000M PREM 00798
[insert premises licence number]


to

Miss Jade Mulley
[full name of transferee]

signed

name
(please print)

dated


John Kerr
29/7/21

* required information

Section 1 of 4

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jungle bar

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☐ Yes

☒ 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

JADE

* Family name

MULLEY

* E-mail

junglebarsunderland@gmail.com

Main telephone number

07427683908

Include country code.

Other telephone number

☐ 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

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SUPERVISOR

Full Name Of Proposed Designated Premises Supervisor

* First name

* Family name

* Nationality

* Place of birth

* Date of birth / /
dd mm yyyy

Personal licence number of proposed designated premises supervisor

Issuing authority of that licence

Full Name Of Existing Designated Premises Supervisor

First name

Family name

* Would you like this application to have immediate effect under section 38 of the Licensing Act 2003?

☒ Yes ☐ No

☒ I will notify the existing premises supervisor (if any) of this application

The premises licence holder can continue the supply of alcohol if, for example, the existing premises supervisor is suddenly indisposed or unable to work.

It is sufficient for the licensee to inform the existing premises supervisor in writing, without sharing the specific details of the application.

* Will the premises licence or relevant part of it be submitted with this application?

☒ Yes ☐ No

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

☒ Electronically, by the proposed designated premises supervisor

☐ As an attachment to this variation

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'

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PAYMENT DETAILS

Consent of individual to being specified as premises supervisor

Mark Morrison

[full name of prospective premises supervisor]

of



hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

JUNGLE BAR LETS GET WILD LTD.

[type of application]

by

MARK MORRISON

[name of applicant]

relating to a premises licence

00CMPREM00798

[number of existing licence, if any]

for

20 VINE PLACE

SUNDERLAND

SR13NA

[name and address of premises to which the application relates]