



Application for a premises licence to be granted 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.

We DODD ENTERPRISES LTD

(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description			
SUITE 1 KELVIN HOUSE KELVIN WAY CRAWLEY WEST SUSSEX RH10 9WE			
Post town	CRAWLEY	Postcode	RH10 9WE

Telephone number at premises (if any)	01293 378 150
Non-domestic rateable value of premises	£ 17,250.00

Part 2 - Applicant details

Please state whether you are applying for a premises licence as **Please tick as appropriate**

- | | | |
|-----|--|-----------------------------|
| a) | an individual or individuals * | please complete section (A) |
| b) | a person other than an individual * | |
| i | as a limited company/limited liability partnership | please complete section (B) |
| ii | as a partnership (other than limited liability) | please complete section (B) |
| iii | as an unincorporated association or | please complete section (B) |
| iv | other (for example a statutory corporation) | please complete section (B) |

- c) a recognised club please complete section (B)
- d) a charity please complete section (B)
- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

I am making the application pursuant to a

statutory function or

a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth		I am 18 years old or over		Please tick yes	
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)					

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SECOND INDIVIDUAL APPLICANT (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth		I am 18 years old or over		Please tick yes	
Nationality					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name: DODD ENTERPRISES LTD
Address: SUITE 1 KELVIN HOUSE KELVIN WAY CRAWLEY WEST SUSSEX RH10 9WE
Registered number (where applicable) 12567547

Description of applicant (for example, partnership, company, unincorporated association etc.)

COMPANY

Teleph

E-mail

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
0	1	0 9 2 0 2 2

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

2,000 SQ. FT. SPACE WITH RACKING/ SHELVING. KITCHENETTE AND TOILETS IN THE CORNER OF THE PREMISES. 4 PARKING SPACES OUT THE FRONT OF THE PREMISES.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

N/A

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)

- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g)
(if ticking yes, fill in box H)

Provision of late night refreshment (if ticking yes, fill in box I)

Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon			<u>Please give further details here</u> (please read guidance note 4)	Both	
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Tue			
Wed			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon			<u>Please give further details here</u> (please read guidance note 4)	Both	
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Mon				Outdoors	
				Both	
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

I

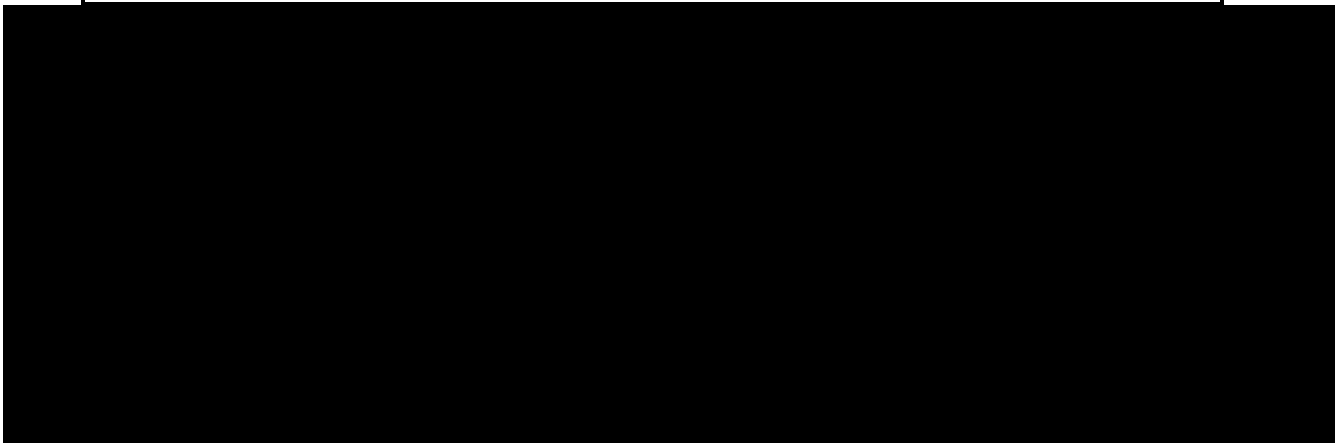
Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
Tue					
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption</u> – <u>please tick</u> (please read guidance note 8)	On the premises	
Day	Start	Finish		Off the premises	X
				Both	
Mon	00:00	23:59	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)		
Tue	00:00	23:59			
Wed	00:00	23:59			
Thur	00:00	23:59	<u>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Fri	00:00	23:59			
Sat	00:00	23:59			
Sun	00:00	23:59			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name	BRANDON LEE AUNG-MYA
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Issuing licensing authority (if known)
LONDON BOROUGH OF SUTTON

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9).

RETAIL SALE OF ALCOHOL DELIVERED DIRECTLY TO CUSTOMERS.

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	NA		
Tue	NA		
Wed	NA		
Thur	NA		
Fri	NA		
			<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 6)
			PREMISES WILL NOT BE ACCESSIBLE TO THE PUBLIC.

Sat	NA		
Sun	NA		

M

Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)

THE PREMISES SHALL ALWAYS MAINTAIN AND OPERATE A SALES REFUSALS RECORDING SYSTEM (EITHER IN BOOK OR ELECTRONIC FORM) WHICH SHALL BE REVIEWED BY THE DESIGNATED PREMISES SUPERVISOR AT INTERVALS OF NO LESS THAN 4 WEEKS AND FEEDBACK GIVEN TO STAFF AS RELEVANT. THIS REFUSALS BOOK WILL BE KEPT AT THE PREMISES AND MADE AVAILABLE TO OFFICERS OF ANY RESPONSIBLE AUTHORITY UPON REQUEST.

- CCTV FOOTAGE WILL BE STORED FOR A MINIMUM OF 31 DAYS.
- THE DESIGNATED PERSON ASSUMING RESPONSIBILITY FOR THE PREMISES WILL GIVE FULL AND IMMEDIATE COOPERATION AND TECHNICAL ASSISTANCE TO THE POLICE IN THE EVENT THAT CCTV FOOTAGE IS REQUIRED FOR THE PREVENTION AND DETECTION OF SUSPECTED OR ALLEGED CRIME.
- THE CCTV IMAGES WILL RECORD AND DISPLAY DATES AND TIMES, AND THESE TIMES WILL BE CHECKED REGULARLY TO ENSURE THEIR ACCURACY.
- SUBJECT TO GENERAL DATA PROTECTION REGULATION (GDPR) GUIDANCE AND LEGISLATION, THE MANAGEMENT OF THE PREMISES WILL ENSURE THAT KEY STAFF ARE FULLY TRAINED IN THE OPERATION OF THE CCTV, AND WILL BE ABLE TO DOWNLOAD SELECTED FOOTAGE ONTO A DISK (OR OTHER ELECTRONIC PORTABLE DEVICE ACCEPTABLE TO SUSSEX POLICE) FOR THE POLICE WITHOUT DIFFICULTY OR DELAY AND WITHOUT CHARGE TO SUSSEX POLICE.
- ANY BREAKDOWN OR SYSTEM FAILURE WILL BE NOTIFIED TO THE POLICE IMMEDIATELY & REMEDIED AS SOON AS PRACTICABLE.
- IN THE EVENT OF THE CCTV SYSTEM HARD DRIVE BEING SEIZED AS EVIDENCE AS PART OF A CRIMINAL INVESTIGATION BY SUSSEX POLICE OR FOR ANY OTHER REASON, THE PREMISES WILL BE EXPECTED TO INSTALL A REPLACEMENT HARD DRIVE, OR A TEMPORARY REPLACEMENT DRIVE AS SOON AS PRACTICABLE.

MEMBERS OF THE PUBLIC WILL NOT BE PERMITTED ACCESS TO THE PREMISES TO VIEW, SHOP, PURCHASE OR COLLECT ANY ALCOHOL. ALL ORDERS WILL BE DELIVERED TO THEM PROVIDING THEY ARE OF LEGAL AGE.

b) The prevention of crime and disorder

ALL SALES OF ALCOHOL WILL BE ORDERED REMOTELY BY THE CUSTOMER (BY PHONE, EMAIL, ONLINE ETC) WITH CUSTOMERS NOT ATTENDING THE PREMISES IN PERSON EITHER TO VIEW, PURCHASE, ORDER OR COLLECT ALCOHOL. ALL ORDERS WILL BE DELIVERED EITHER BY A MEMBER OF STAFF OR A THIRD-PARTY HAULIER.

c) Public safety

CCTV WILL BE OPERATION ON THE PERIMETER OF THE PREMISES TO ACT AS A DETERRENT TO ERRATIC PUBLIC BEHAVIOUR.
MEMBERS OF THE PUBLIC WILL NOT BE PERMITTED ACCESS TO THE PREMISES.

d) The prevention of public nuisance

CCTV WILL BE OPERATION ON THE PERIMETER OF THE PREMISES TO ACT AS A DETERRENT TO PUBLIC NUISANCE.
MEMBERS OF THE PUBLIC WILL NOT BE PERMITTED ACCESS TO THE PREMISES SO THERE SHOULD NOT BE ANY MEMBERS OF THE PUBLIC IN THE PROXIMITY OF THE PREMISES CAUSING A NUISANCE.
ALCOHOL DELIVERIES WILL BE DURING BUSINESS HOURS AND WILL BE ASSISTED BY MEMBERS OF STAFF TO REDUCE THE CHANCES OF A NUISANCE BEING CAUSED.

e) The protection of children from harm

ALCOHOL DELIVERIES WILL ONLY BE MADE TO A RESIDENTIAL OR BUSINESS ADDRESS AND NOT TO A PUBLIC PLACE.

THE PREMISES LICENCE HOLDER SHALL ENSURE THAT ALL STAFF MEMBERS (INCLUDING FRIENDS AND FAMILY MEMBERS) ENGAGED OR TO BE ENGAGED, IN SELLING ALCOHOL AT THE PREMISES SHALL RECEIVE THE FOLLOWING INDUCTION TRAINING. THIS TRAINING WILL TAKE PLACE PRIOR TO THE SELLING OF SUCH PRODUCTS:

- THE LAWFUL SELLING OF AGE RESTRICTED PRODUCTS REFUSING
- THE SALE OF ALCOHOL TO A PERSON WHO IS DRUNK

FURTHER VERBAL REINFORCEMENT/ REFRESHER TRAINING COVERING THE ABOVE WILL BE CARRIED OUT THEREAFTER AT INTERVALS NOT TO EXCEED SIX MONTHS, WITH THE DATE AND TIME OF THE VERBAL REINFORCEMENT/REFRESHER TRAINING DOCUMENTED.

ALL SUCH TRAINING UNDERTAKEN BY STAFF MEMBERS SHALL BE FULLY DOCUMENTED AND RECORDED. ALL TRAINING RECORDS WILL BE KEPT AT THE PREMISES AND MADE AVAILABLE TO OFFICERS OF ANY RESPONSIBLE AUTHORITY UPON REQUEST.

THE AGE VERIFICATION POLICY (INCLUDING CHALLENGE 25) SHALL CLEARLY

BE ADVERTISED AT EACH STAGE OF THE ORDER AND ON ALL ADVERTISING. ALL FORMS OF ADVERTISING AND PROMOTIONAL LITERATURE DETAILING THE DELIVERY SERVICE (INCLUDING INTERNET SITES AND FLYERS/LEAFLETS) WILL CLEARLY STATE THAT ALCOHOL SHOULD ONLY BE PURCHASED FOR DELIVERY TO INTENDED RECIPIENTS (OR PERSONS WHO WILL ACCEPT DELIVERY ON BEHALF OF THE NAMED RECIPIENT) WHO ARE AGED 18 AND OVER. CUSTOMERS WILL BE REMINDED THAT IT IS A CRIMINAL OFFENCE FOR A PERSON UNDER 18 TO PURCHASE OR ATTEMPT TO PURCHASE ALCOHOL AND THAT IT IS ALSO AN OFFENCE TO PURCHASE ALCOHOL ON BEHALF OF A PERSON AGED UNDER 18.

AT THE TIME THE ORDER IS PLACED A DECLARATION WILL BE REQUIRED FROM THE PERSON PLACING THE ORDER THAT THAT PERSON IS AGED 18 AND OVER, AND THAT THE INTENDED RECIPIENT ARE AGED 18 YEARS AND OVER. THIS PROCESS WILL BE DOCUMENTED, (TICK BOX BEFORE PROCEEDING, RECORD OF VERBAL ACKNOWLEDGEMENT OR SIMILAR). THESE RECORDS MUST BE RETAINED FOR NO LESS THAN TWELVE MONTHS AND PRODUCED ON REQUEST TO AN OFFICER OF A RESPONSIBLE AUTHORITY.

1. FOR DELIVERIES WHERE THE ALCOHOL IS DELIVERED BY A THIRD PARTY, THE ALCOHOL IS CONCEALED IN A SECURE SEALED PACKAGE, AND THE DPS HAS NO DIRECT SUPERVISION OR CONTROL OVER THE DELIVERY (SUCH AS AN INDEPENDENT COURIER OR ROYAL MAIL), THERE CANNOT BE AN AGE VERIFICATION CHALLENGE ON DELIVERY, BUT THE ABOVE CONDITIONS WILL BE FOLLOWED.
2. FOR DELIVERIES MADE DIRECTLY BY THE DPS OR THEIR EMPLOYEES, STAFF OR AGENT OR PERSONS INSTRUCTED BY THE DPS/PLH, THE PERSON ACCEPTING THE DELIVERY MUST BE AGED 18 YEARS AND OVER. WHERE THE PERSON ACCEPTING DELIVERY APPEARS TO BE UNDER 25, A RECOGNISED PHOTOGRAPHIC ID MUST BE PRODUCED PRIOR TO DELIVERY. NO ID, NO DELIVERY.
3. WHERE THE PREMISES CONTRACTS A THIRD PARTY TO DELIVER ALCOHOL ON THEIR BEHALF AND THE PERSON COLLECTING THE ALCOHOL FROM THE PREMISES DELIVERS IT DIRECTLY TO THE CUSTOMER WITHIN A SHORT TIMESCALE (SUCH AS DELIVEROO, JUST EAT), THE PREMISES WILL ENSURE THAT THE THIRD PARTY:
 - ONLY EMPLOYS DELIVERY EMPLOYEES OR AGENTS AGED 18 AND OVER.
 - IS AWARE THAT ALCOHOL IS INCLUDED IN THE DELIVERY.
 - THAT THE DELIVERY PERSON ACTIVELY ENGAGES WITH THE PERSON RECEIVING DELIVERY AND OPERATES A CHALLENGE 25 POLICY RATHER THAN JUST HANDING THE DELIVERY OVER.
 - IN THE EVENT THAT THE RECIPIENT OF THE ALCOHOL IS CHALLENGED FOR ID AND DOES NOT PROVIDE APPROPRIATE AND VALID ID, THE DELIVERY PERSON WILL RETAIN THE ALCOHOL AND RETURN IT TO THE PREMISES.

Checklist:

- I have made or enclosed payment of the fee. **TO BE MADE ON SUBMISSION OF APPLICATION.**

- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.
- I understand that I must now advertise my application.
- I understand that if I do not comply with the above requirements my application will be rejected.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	<ul style="list-style-type: none"> • [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). • The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
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Signature	[REDACTED]
Date	14 TH JULY 2022
Capacity	OPERATIONS MANAGER FOR DODD ENTERPRISES LTD

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). 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 14)

Post town		Postcode	
Telephone number (if any)		[REDACTED] ail address (optional)	