



Representation	
Premises name	testPremiseName
Application reference number	TEST\PERM-LIC\057347
Last date for representation	12/03/2016

## Making a representation as

As an individual

## Your details

First name

sasi

Last name

sas

Telephone number (optional)

012345

Email address

sasikala.sakthivelu@camden.gov.uk

Address

218 A Eversholt Street  
London  
NW1 1BD

Remain anonymous

No

Grounds of representation

- protection of children from harm

Details of representation

test

## About this form

Issued by

Camden Town Hall  
Judd Street  
London  
WC1H 9JE

Contact phone

020 7974 4444

## Data protection

No personal information you have given us will be passed on to third parties for commercial purposes. The Council's policy is that all information will be shared among officers and other

agencies where the legal framework allows it, if this will help to improve the service you receive and to develop other services. If you do not wish certain information about you to be exchanged within the Council, you can request that this does not happen.