Consent of individual to being specified as premises supervisor

		Trandafir Claudia-Mihael	a	
	1	[full name of prospective prem	ises supervisor]	
	597 Leyt	Flat 12 597 Lea Bridge Road Leyton London E10 6AJ		
	[home address of prospective premises supervisor]			
hereby confirm that I give my consent to be specified as the designate supervisor in relation to the application for				
	alco		anted under the Licensing Act 2003 for the supply of	
	by			
	PHO	NE AND VAPE LIMITED		
	[name	of applicant]		
	relatir	ng to a premises licence	[number of existing licence, if any]	
	for			
	Grou 104 Lone	ring Corner und Floor Charing Cross Road don 2H 0JN		
	[name	[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			
PHONE AND VAPE LIMITED			
name of applicant]			
concerning the supply of alcohol at			
Charing Corner Ground Floor 104 Charing Cross Road London WC2H 0JN			
[name and address of premises to which application relates]			
I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.			
Personal licence number			
Z01N04597L/2			
[insert personal licence number, if any]			
Personal licence issuing authority			
London Borough of Waltham Forest			
[insert name and address and telephone number of personal licence issuing authority, if any]			
Signed			
Name (please print) TRANDAFIR CLAUDIA-MIHAELA			
Date 14.02.2022			