**Consent of individual to being specified as premises supervisor**

I

*[full name of prospective premises supervisor]*

Of

…………………………………………………………………………………………………………………………………………….

*[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

Application to Specify DPS.

……………………………………………………………………………………………..

*[type of application]*

By

………………………………………………………………………………………………

*[name of applicant]*

relating to a premises licence ……………………………………………………..

*[number of existing licence, if any]*

*For*

*[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

concerning the supply of alcohol at

…………………………………………………………………………………………………………………………………………………..

*[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

…………………………………………………………………………………………………………………………………

*[insert personal licence number, if any]*

Personal licence issuing authority

……………………………………………………………………………………………………………

Signed: ……………………………………………………………………………………………………………….

**Dated:**

**Print Name**: