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

|  |
| --- |
|  ESTELLE REYNOLDS |

 *[full name of prospective premises supervisor]*

OF

FLAT 9

96 ROPE STREET

LONDON

SE16 7TQ

*[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

|  |
| --- |
|      PREMISES LICENCE |

 *[type of application]*

by

|  |
| --- |
|      NEAL’S YARD DAIRY LIMITED |

*[name of applicant]*

|  |
| --- |
|  |

relating to a premises licence

 *[number of existing licence, if any]*

for

NEAL’S YARD DAIRY

17 SHORTS GARDENS

LONDON

WC2H 9AT

*[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

|  |
| --- |
|     NEAL’S YARD DAIRY LIMITED |

 *[name of applicant]*

concerning the supply of alcohol at

|  |
| --- |
| NEAL’S YARD DAIRY17 SHORTS GARDENSLONDONWC2H 9AT |

 *[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

|  |
| --- |
| 9029 |

*[insert personal licence number, if any]*

Personal licence issuing authority

SOUTHWARK COUNCIL

REGULATORY SERVICES

3RD FLOOR HUB 1, PO BOX 64529, LONDON, SE1P 5LX

licensing@southwark.gov.uk

*[insert name and address and telephone number of personal licence issuing authority, if any]*

|  |
| --- |
|  |

Signed

Name (please print)

|  |
| --- |
|  ESTELLE REYNOLDS |

Date;