

Acc Ref : 113692/9330  
Trans Ref : 000100020705  
Cashier : JAI  
Date : 250718  
Amount : £23.00  
Method of Payment: P Cheques

SOUTH RIBBLE BOROUGH COUNCIL

**OFFICIAL RECEIPT**

VAT REGISTRATION NUMBER  
155 6733 48

Received here the sum stated in printed figures.

LICENSING

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.

I/We KSA MANAGEMENT SERVICES being the premises licence holder, apply to vary  
(full name(s) of premises licence holder)  
a premises licence to specify the individual named in this application as the  
premises supervisor under section 37 of the Licensing Act 2003

Premises licence number

PREMA0160

**Part 1 – Premises details**

Postal address of premises or, if none, ordnance survey map reference or description

THE OLDE HOB INN  
8-9 CHURCH ROAD  
BAMBER BRIDGE

Post town PRESTON

Post code PR5 6EP

Telephone number (if any)

01772 334648

Description of premises (please read guidance note 1)

TRADITIONAL FOOD & DRINK PUB IN  
BAMBER BRIDGE.

THIS IS ONLY A TEMPORARY TENANCY  
UNTIL BREWERY FIND NEW TENANTS

113692 / 9330 CP

## Appendix 1

### Part 2

Full name of proposed designated premises supervisor

STUART DANIEL GRISEDAL

Personal licence number of proposed designated premises supervisor and issuing authority of that licence (if any)

07/00187/PERS NORWICH CITY COUNCIL

Full name of existing designated premises supervisor (if any)

GARY COMPTON

Please tick ☒ yes

I would like this application to have immediate effect under section 38 of the Licensing Act 2003 ☒

I have enclosed the premises licence or relevant part of it ☒

(If you have not enclosed the premises licence, or relevant part of it, please give reasons why not)

Reasons why I have failed to enclose the premises licence or relevant part of it

Please tick ☒ yes

- I have made or enclosed payment of the fee ☒
- I will give a copy of this application to the chief officer of police ☒
- I have enclosed the consent form completed by the proposed premises supervisor ☒
- I have enclosed the premises licence, or the relevant part of it or explanation ☒
- I will give a copy of this form to the existing premises supervisor, if any ☒
- I understand that if I do not comply with the above requirements my application will be rejected ☒

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

## Appendix 1

### Part 3 – Signatures (please read guidance note 2)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 3).  
If signing on behalf of the applicant please state in what capacity.

Signature

.....

Date

.....

Capacity

.....

For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 4). If signing on behalf of the applicant please state in what capacity.

Signature

.....

Date

.....

Capacity

.....

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 5)

Post town

Post code

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

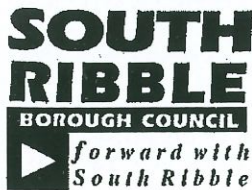
stuart@blackhorse-gregsonlane.co.uk

#### Guidance notes

1. Describe the premises. For example the type of premises it is.
2. The application form must be signed.
3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
5. This is the address which we shall use to correspond with you about this application.



# Appendix 1



South Ribble Borough Council  
Licensing Service

Civic Centre  
West Paddock  
Leyland  
Lancashire  
PR25 1DH

Tel: 01772 625326

Fax: 01772 621 032

Email: [licensing@southribble.gov.uk](mailto:licensing@southribble.gov.uk)

Website: [www.southribble.gov.uk/licensing](http://www.southribble.gov.uk/licensing)

## Consent of individual to being specified as premises supervisor

I, STUART DANIEL GRISEDALE  
[insert full name of prospective premises supervisor]

of: BLACK HORSE GREGSON LANE, PRESTON PR5 0ED  
[insert 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:

VARIATION OF DPS  
[Type of application]

by: KSA MANAGEMENT SERVICES LTD  
[insert name of applicant]

relating to a premises licence: PREMA 0160  
[insert number of existing licence, if any]

For: 4E OLDE MOB INN, 8-9 CHURCH RD, BAMBER BRIDGE, PR5 6EP  
[insert 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:

STUART DANIEL GRISEDALE  
[insert name of applicant]

Concerning a supply of alcohol at:

4E OLDE MOB INN 8-9 CHURCH RD, BAMBER BRIDGE, PR5 6EP  
[insert name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for, or currently hold a personal licence, details of which I set out below:

Personal licence number: 07/00187/PERS  
[insert personal licence number, if any]

Personal licence issuing Authority: NORWICH CITY COUNCIL  
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed: J. Grisedale

Name (please print): STUART GRISEDALE

Dated: 18/7/18