# Application for a Premises Licence under the Licensing Act 2003

**Please read the following instructions first –**

- Use the extra page at the end of the form to provide further details if necessary
- When it is complete you can submit the form directly to us – use the submit button. You may wish to print and keep a copy of the completed form for your records. For information about filling in this type of electronic form, use the help button
- For any applications which include the sale of alcohol, you will need to ensure the Designated Premises Supervisor has completed the consent form and upload it to validate your application
- **Before you complete this form -**
  - Please read the available information on the Licensing Act 2003 (opens in a new tab)
  - Please read the application specific guidance notes (opens in a new tab)
  - Please read the Home Office guidance and refer to it while completing your application (opens in a new tab)

What district/local area are you applying to?

**I / We** Nrdflk Ltd *(premises licence holder name)*

**apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003.**

## Premises Details

Postal address of premises or, if none, ordinance survey map reference or description: 20 Pottergate
Norwich

Postcode: NR2 1DX

Telephone number of premises: [redacted]

What is the non-domestic rateable value of the premises? [redacted]

Trading name of the business: norðfolk

## Applicant Details

Please state whether you are applying for a premises licence as

As a Limited Company

Please confirm:

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities [X]

or

I am making the application pursuant to a:

Statutory function or [ ]

A function discharged by virtue of His Majesty's prerogative [ ]

## INDIVIDUAL APPLICANTS (fill in as applicable)

Note, names provided in this section must match the premises licence holder names given earlier.

Title

Forename(s)

Surname

Are you 18 years or older? Yes ☐ No ☐

Date of birth

Current postal address if different from premises address

Postcode

Telephone number

Email address

Confirm email address

**Right to Work** - where applicable (if demonstrating a right to work via the Home Office online right to work checking service (opens in a new tab)), the 'share code' provided to the applicant by that service.

Input share code if applicable

## SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Title

Forename(s)

Surname

Date of birth (you must be 18 years old or over)

Current postal address if different from premises address

Postcode

Telephone number

Email address

Confirm email address

**Right to Work** - where applicable (if demonstrating a right to work via the Home Office online right to work checking service (opens in a new tab)), the 'share code' provided to the applicant by that service.

Input share code if applicable

## OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), **please give the name and address of each party concerned**.

| | |
|---|---|
| Name | Nrdflk Ltd |
| Address | 20 Pottergate<br>Norwich<br>Nrd 1DX |
| Registered number (where applicable) | 16945780 |
| Description of applicant (for example, partnership, company, unincorporated association etc.) | Limited Company |
| Telephone number (if any) | [redacted] |
| Email address (optional) | [redacted] |
| Confirm email address (optional) | [redacted] |

| Agent details | |
|---|---|
| Title | |
| Forename(s) | |
| Surname | |
| Address | |
| Postcode | |
| Telephone number | |
| Email address | |
| Confirm email address | |

## Operating Schedule

When do you want the premises licence to start? 03/06/2026

Please note, your application for a premises licence may take up to two months to determine.

If you wish the licence to be valid only for a limited period, when do you want it to end?

Are more than 5,000 people to attend the premises at any one time? Yes ☐ No ☐

If 5,000 or more people attend the premises at any one time, please state the number expected to attend

General description of premises (please read guidance note 1 (opens in a new tab))

Coffee Lounge And Retail On The Ground Floor With A Hair Studio On The First Floor Based In The Lanes Of Norwich Situated In Pottergate. Brick And Mortar Built Building With Large Glazed Shopfront Window With Retractable Security Grille. All Ground Floor Windows Have Security Grilles And First Floor Security Grilles For Back Windows. Cctv Inside. Coffee Lounge Accommodates 16 Seats. First Floor Hair Studio Accommodates 4 Waiting Area Chairs And 6 Styling Chairs

## Operating Schedule Continued

What licensable activities do you intend to carry on from the premises?
(Please see section 1 of the Licensing Act 2003 (opens in a new tab) and Schedule 1 and 2 to the Licensing Act (opens in a new tab)).

**Provision of regulated entertainment**

| | |
|---|---|
| a) plays | ☐ |
| b) films | ☐ |
| c) indoor sporting events | ☐ |
| d) boxing or wrestling entertainment | ☐ |
| e) live music | ☐ |
| f) recorded music | X |
| g) performance of dance | ☐ |
| h) anything of a similar description to that falling within e, f or g | ☐ |

**i) Provision of late night refreshment** (hot food and, or drink 11pm-5am) ☐

**j) Supply of alcohol** X

Is the premises exclusively or primarily selling alcohol for consumption on the premises? ☐

Do you want to remove the requirement to name a Designated Premises Supervisor (DPS)? Yes ☐ No X

# A

| | | | | | | |
|---|---|---|---|---|---|---|
| **Plays**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | | | **Will the performance of a play take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors | ☐ | |
| | | | | Outdoors | ☐ | |
| | | | | Both | ☐ | |
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | | | Yes | ☐ | No ☐ |
| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) | | | |
| **Mon** | ☐ | ☐ | | | | |
| **Tues** | ☐ | ☐ | | | | |
| **Wed** | ☐ | ☐ | **State any seasonal variations for performing plays** (please read guidance note 4 (opens in a new tab)) | | | |
| **Thur** | ☐ | ☐ | | | | |
| **Fri** | ☐ | ☐ | **Non standard timings. Where you intend to use the premises for the performance of a play at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) | | | |
| **Sat** | ☐ | ☐ | | | | |
| **Sun** | ☐ | ☐ | | | | |

# B

| **Films**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | **Will the exhibition of films take place indoors or outdoors or both?**<br>(Please read guidance note 2 (opens in a new tab)) | Indoors ☐<br>Outdoors ☐<br>Both ☐ |
|---|---|---|
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | Yes ☐ No ☐ |

| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) |
|---|---|---|---|
| **Mon** | | | |
| **Tues** | | | |
| **Wed** | | | **State any seasonal variations for the exhibition of films** (please read guidance note 4 (opens in a new tab)) |
| **Thur** | | | |
| **Fri** | | | **Non standard timings. Where you intend to use the premises for the exhibition of films at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) |
| **Sat** | | | |
| **Sun** | | | |

# C

| **Indoor Sporting Events**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | | | |
|---|---|---|---|
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | | Yes ☐ No ☐ |
| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) |
| **Mon** | | | |
| **Tues** | | | |
| **Wed** | | | **State any seasonal variations for indoor sporting events** (please read guidance note 4 (opens in a new tab)) |
| **Thur** | | | |
| **Fri** | | | **Non standard timings. Where you intend to use the premises for indoor sporting events at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) |
| **Sat** | | | |
| **Sun** | | | |

# D

| **Boxing or wrestling entertainment**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | **Will the boxing or wrestling entertainment take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors ☐<br>Outdoors ☐<br>Both ☐ |
|---|---|---|
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | Yes ☐ No ☐ |

| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) |
|---|---|---|---|
| **Mon** | | | |
| **Tues** | | | |
| **Wed** | | | **State any seasonal variations for boxing or wrestling entertainment** (please read guidance note 4 (opens in a new tab)) |
| **Thur** | | | |
| **Fri** | | | **Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) |
| **Sat** | | | |
| **Sun** | | | |

# E

| | | | | | | |
|---|---|---|---|---|---|---|
| **Live music**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | | | **Will the performance of live music take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors | ☐ | |
| | | | | Outdoors | ☐ | |
| | | | | Both | ☐ | |
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | | | Yes | ☐ | No ☐ |
| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) | | | |
| **Mon** | ☐ | ☐ | | | | |
| **Tues** | ☐ | ☐ | | | | |
| **Wed** | ☐ | ☐ | **State any seasonal variations for performance of live music** (please read guidance note 4 (opens in a new tab)) | | | |
| **Thur** | ☐ | ☐ | | | | |
| **Fri** | ☐ | ☐ | **Non standard timings. Where you intend to use the premises for the performance of live music at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) | | | |
| **Sat** | ☐ | ☐ | | | | |
| **Sun** | ☐ | ☐ | | | | |

**F**

| **Recorded music**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | **Will the playing of recorded music take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors | X |
|---|---|---|---|
| | | Outdoors | |
| | | Both | |

| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | Yes | | No | X |
|---|---|---|---|---|

| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) |
|---|---|---|---|
| **Mon** | | | BACKGROUND MUSIC TO BE PLAYED FROM SPEAKERS |
| **Tues** | 09:00 | 20:00 | |
| **Wed** | 09:00 | 20:00 | **State any seasonal variations for playing recorded music** (please read guidance note 4 (opens in a new tab)) N/A |
| **Thur** | 09:00 | 20:00 | |
| **Fri** | 09:00 | 21:00 | **Non standard timings. Where you intend to use the premises for the playing of recorded music at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) N/A |
| **Sat** | 09:00 | 21:00 | |
| **Sun** | 11:00 | 18:00 | |

# G

| **Performance of dance**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | **Will the performance of dance take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors | |
|---|---|---|---|
| | | Outdoors | |
| | | Both | |

| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | Yes | | No | |
|---|---|---|---|---|

| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) |
|---|---|---|---|
| **Mon** | | | |
| **Tues** | | | |
| **Wed** | | | **State any seasonal variations for the performance of dance** (please read guidance note 4 (opens in a new tab)) |
| **Thur** | | | |
| **Fri** | | | **Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) |
| **Sat** | | | |
| **Sun** | | | |

# H

| | | | | |
|---|---|---|---|---|
| **Anything of a similar description to that falling within (e), (f) or (g)** Standard days and timings (please read guidance note 6 (opens in a new tab)) | **Please give a description of the type of entertainment you will be providing** | | | |
| | **Will the entertainment take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors | ☐ | |
| | | Outdoors | ☐ | |
| | | Both | ☐ | |
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | Yes | ☐ | No ☐ |

| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) |
|---|---|---|---|
| Mon | | | |
| Tues | | | |
| Wed | | | **State any seasonal variations for entertainment of a similar description to that falling within (e), (f) and (g)** (please read guidance note 4 (opens in a new tab)) |
| Thur | | | |
| Fri | | | **Non standard timings. Where you intend to use the premises for entertainment of a similar description to that falling within (e), (f) or (g) at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) |
| Sat | | | |
| Sun | | | |

I

| | | | | | | |
|---|---|---|---|---|---|---|
| **Late night refreshment**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | | | **Will the provision of late night refreshment take place indoors or outdoors or both?** (Please read guidance note 2 (opens in a new tab)) | Indoors | ☐ | |
| | | | | Outdoors | ☐ | |
| | | | | Both | ☐ | |
| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | | | | Yes | ☐ | No ☐ |
| Day | Start time | Finish time | **Please give further details here** (please read guidance note 3 (opens in a new tab)) | | | |
| **Mon** | | | | | | |
| **Tues** | | | | | | |
| **Wed** | | | **State any seasonal variations for the provision of late night refreshment** (please read guidance note 4 (opens in a new tab)) | | | |
| **Thur** | | | | | | |
| **Fri** | | | **Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times than those listed, please list** (please read guidance note 5 (opens in a new tab)) | | | |
| **Sat** | | | | | | |
| **Sun** | | | | | | |

# J

| **Supply of alcohol**<br>Standard days and timings<br>(please read guidance note 6 (opens in a new tab)) | **Will the supply of alcohol be for consumption:**<br>(please read guidance note 2 (opens in a new tab)) | On the premises | X |
|---|---|---|---|
| | | Off the premises | |
| | | Both | |

| **Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?** | Yes | | No | X |
|---|---|---|---|---|

| Day | Start time | Finish time |
|---|---|---|
| **Mon** | | |
| | | |
| **Tues** | 12:00 | 20:00 |
| | | |
| **Wed** | 12:00 | 20:00 |
| | | |
| **Thur** | 12:00 | 20:00 |
| | | |
| **Fri** | 12:00 | 21:00 |
| | | |
| **Sat** | 12:00 | 21:00 |
| | | |
| **Sun** | 12:00 | 18:00 |
| | | |

**State any seasonal variations for the supply of alcohol**
(please read guidance note 4 (opens in a new tab))

**Non standard timings. Where you intend to use the premises for the supply of alcohol at different times than those listed, please list** (please read guidance note 5 (opens in a new tab))

**State the name and details of the individual whom you wish to specify on the licence as Designated Premises Supervisor (DPS).**

| | |
|---|---|
| Title | Mr |
| Forename(s) | SAMUEL |
| Surname | BIRD |
| Date of birth | [redacted] |
| Home address | [redacted] |
| Postcode | [redacted] |
| Personal licence number | [redacted] |
| Issuing licensing authority | [redacted] |

**Please complete the 'Consent of individual to being specified as designated premises supervisor' form and have the person specified above confirm the details given.**

**Consent to being specified as Designated Premises Supervisor**

I, SAMUEL BIRD

[Full name of designated premises supervisor]

of [redacted]

[Home address of designated premises supervisor]

**Hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for:**

**Type of application** NEW PREMISES LICENSE

**by** Nrdflk Ltd

[Name of premises licence holder/s]

**Relating to a premises licence**

[Number of existing licence, if any]

**For**

Name of premises norðfolk

Address of premises 20 Pottergate
Norwich

Postcode NR2 1DX

**And any premises licence to be granted or varied in respect of this application made by**

Name of premises licence holder/s Nrdflk Ltd

**Concerning the supply of alcohol at**

Name of premises norðfolk

Address of the premises 20 Pottergate
Norwich

Postcode NR2 1DX

## Consent of individual to being specified as premises supervisor (cont.)

**I 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 have set out on this form.**

**Personal licence number** [redacted]

[insert personal licence number, if any]

**Personal licence issuing authority (if any)**

Name of authority [redacted]

Address of authority [redacted]

Postcode [redacted]

Telephone number of authority [redacted]

**Confirmation** X

Name SAMUEL BIRD

Date 08/05/2026

# K

**Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children** (please read guidance note 8 (opens in a new tab))

# L

| Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours? | Yes | | No | X |
|---|---|---|---|---|

**Hours premises are open to the public**
Standard days and timings (please read guidance note 6 (opens in a new tab))

| Day | Start time | Finish time |
|---|---|---|
| Mon | | |
| Tues | 09:00 | 20:00 |
| Wed | 09:00 | 20:00 |
| Thur | 09:00 | 20:00 |
| Fri | 09:00 | 21:00 |
| Sat | 09:00 | 21:00 |
| Sun | 11:00 | 18:00 |

**State any seasonal variations** (please read guidance note 4 (opens in a new tab))

**Non standard timings. Where you intend to use the premises to be open to the public at different times than those listed, please list** (please read guidance note 5 (opens in a new tab))

**M –** Describe the steps you intend to take to promote the four licensing objectives:

**a) General – all four licensing objectives (b,c,d,e)** (please read guidance note 9 (opens in a new tab))

The premises will operate primarily as a coffee shop/café with the sale of alcohol ancillary to food and beverage service.

The premises licence holder and staff will actively promote the four licensing objectives at all times. Staff will be trained in responsible alcohol retailing, age verification procedures, customer service, and the prevention of nuisance and disorder.

Management will maintain good communication with local residents and responsible authorities where appropriate. The premises will be operated in a safe and professional manner with appropriate management controls, cleaning procedures, and staff supervision in place.

**b) The prevention of crime and disorder**

A Challenge 25 policy will operate at the premises.

Staff will receive training in age verification and responsible alcohol sales.

CCTV will be installed and maintained covering key areas of the premises.

Any incidents of crime or disorder will be recorded and reported to the appropriate authorities where necessary.

Alcohol will only be sold to customers in a responsible manner.

**c) Public safety**

The premises will comply with all relevant fire safety and health and safety legislation.

Fire exits and escape routes will be clearly marked and kept unobstructed at all times.

Staff will receive appropriate health and safety training.

The premises will be maintained in a safe condition for customers and staff.

**d) The prevention of public nuisance**

Recorded music will be kept at an appropriate level so as not to cause disturbance to nearby residents or businesses.

Customers will be encouraged to leave the premises quietly and respectfully.

Waste disposal and bottle collections will take place at reasonable hours wherever possible.

Management will monitor noise levels and take appropriate action if required.

**e) The protection of children from harm**

No alcohol will be sold to persons under the age of 18.

A Challenge 25 policy will be in operation and acceptable photographic identification will be required where appropriate.

Children will be supervised by responsible adults whilst on the premises.

# Custom Process Configuration

## XML Specific

| | |
|---|---|
| Application type | |
| Licence Case Type | |
| Licence Status | |
| XML Template | |
| CAPS Reference | 26/00733/PREM |

## Payments request

| | |
|---|---|
| CallingAppID | |
| CallingAppRef | |
| PaymentSourceCode | |

## Response response

| | |
|---|---|
| PaymentAuthorisationCode | |
| IncomeManagementReceiptNumber | NOEL00009014 |
| Originators Reference | |
| CardScheme | |
| CardType | |
| PaymentAmount | |
| ResponseCode | |
| ResponseDescription | |
| Number of payment lines | |

## Payment 1

| | |
|---|---|
| Receipt Number | |
| DueDate | |
| PaymentType | |
| Pay Description | |
| XML Description | Premises Licence |
| PaymentDue | [redacted] |
| Paid | |
| Payment Date | 14/05/2026 |
| Fund | |
| Reference | YF2NDB10N98 |

## Form Calculations

| | | | |
|---|---|---|---|
| Title Casing | | Enable Priv Pol | Section M Mand |
| Sentence Casing | | DPSCon Form | |
| UPRN for address lookup | | DPS PLN | |
| Boolean to hide this page | | DPS DOB | |
| Field for email (Bath or Brom) | | Agent Email | |
| Field for fee array | BandA,100.00,BandB,190.00,BandC,315.00,BandDNoAlcohol,450.00,BandDWithAlcohol,900.00,BandENoAlcohol,635.00,BandEWithAlcohol,1905.00,5000to9999Attendees,1000.00,10000to14999Attendees,2000.00,15000to19999Attendees,4000.00,20000to29999Attendees,8000.00,30000to39999Attendees,16000.00,40000to49999Attendees,24000.00,50000to59999Attendees,32000.00,60000to69999Attendees,40000.00,70000to79999Attendees,48000.00,80000to89999Attendees,56000.00,Morethan90000Attendees,64000.00 | Agent D Tel | |
| WRS custodian initials | | Capacity | |
| Enable Personal Licence La list | | Personal Licence issuer code | |

## Other Custom Calculations

| | | | |
|---|---|---|---|
| Calculation for licensable activities | | App Day Tel | |
| Subject Line for Email Out | | App Email | |
| Body for Internal Email | | App Address | |
| Body for External Email | | App DOB | |
| Start Date in XML format | | App 2 D Tel | |
| End Date in XML Format | | App 2 Email | |
| Hours the TEN covers | | App 2 Add | |
| DOB | | App 2 DOB | |
| Customer Email Acknowledgment | | Corr D Tel | |
| Premise Activities Complete | | Corr Add | |
| Premise Activities Part 1 | | Corr Email | |
| Premise Activities Part 2 | | Open Hours | |
| Premise Address | | App 3 D Tel | |
| TP Address | | App 3 Email | |
| TP DOB | | Ext Pty Email | |

| | |
|---|---|
| I am providing / attaching a the plan of the premises (See section 2.9 (opens in a new tab) of this guidance)<br><br>Please upload your plan of the premises FIRE PLAN NRDFLK.pdf | X |

| | |
|---|---|
| The nominated Designated Premises Supervisor has completed the consent form contained within this application<br><br>If suitable, you can upload the completed designated supervisor consent form | X |

| | |
|---|---|
| I am applying as an individual rather than a business / limited company and have provided proof of my entitlement to work in the UK (for information on what you can provide as evidence, please reference our evidence guidance notes (opens in a new tab))<br><br>Please upload proof of your entitlement to work in the UK (if you have not provided a share code) | |

| | |
|---|---|
| I understand that if I do not comply with the above requirements my application will be rejected | X |

| | |
|---|---|
| I understand that once my application has been formally accepted, I must advertise my application. Please note you should not arrange the advertising of your application until you have specifically received confirmation from the Licensing Authority that your application has been formally accepted and is being processed | |

☐

Use this page if there is any other information that you think we should know about.

The premises will operate primarily as a coffee shop/café with alcohol sales ancillary to the main business. The venue will provide specialty coffee, light refreshments, and a relaxed sit-down environment for customers, with the option of purchasing alcoholic beverages responsibly for consumption on the premises.

The business also incorporates a boutique salon operating on the upper floor. Alcohol sales will not form the primary purpose of the business and the premises will not operate as a bar, pub, or nightclub.

**Declaration** (please read guidance note 10 (opens in a new tab))

[Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK.

The Designated Premises Supervisor named in this application form is entitled to work in the UK (and is not subject to conditions preventing them from doing work relating to a licensable activity) and I have seen a copy of their proof of entitlement to work, if appropriate.

A person commits an offence if they knowingly or recklessly makes a false statement in or in connection with an application for a premises licence.

It is an offence under section 24b of the Immigration Act 1971 for a person to work when they know, or have reasonable cause to believe, that they are disqualified from doing so by reason of their immigration status. Those who employ an adult without leave or who is subject to conditions as to employment will be liable to a civil penalty under section 15 of the Immigration, Asylum and Nationality Act 2006 and pursuant to section 21 of the same act, will be committing an offence where they do so in the knowledge, or with reasonable cause to believe, that the employee is disqualified.

**Confirmation of applicant or applicant's solicitor or other duly authorised agent** (please see guidance note 11 (opens in a new tab)). **If confirming on behalf of the applicant please state in what capacity.**

| | |
|---|---|
| **Confirmation** | X |
| Name | Samuel Bird |
| Date | 14/05/2026 |
| Capacity (owner, director etc.) | Director |

**For joint applications, confirmation of 2nd applicant or 2nd applicant's solicitor or other authorised agent** (please see guidance note 12 (opens in a new tab)). **If confirming on behalf of the applicant please state in what capacity.**

| | |
|---|---|
| **Confirmation** | |
| Name | |
| Date | |
| Capacity (owner, director etc.) | |

**Contact name (where not previously given) and postal address for correspondence associated with this application** (please see guidance note 11 (opens in a new tab))

| | |
|---|---|
| Name | Samuel Bird |
| Address | 20 Pottergate<br>Norwich |
| Postcode | NR2 1DX |
| Telephone number (if any) | [redacted] |
| Email address | [redacted] |
| Confirm email address | [redacted] |



