



**Leeds**  
CITY COUNCIL

**Elections, Licensing and Registration**  
Entertainment Licensing  
Civic Hall  
Leeds LS1 1UR

Enterprise Inns Plc  
3 Monnkpath Hall Road  
Solihull  
B90 4SJ

Contact: Mrs Emma White  
Tel: 0113 2474095  
Fax: 0113 2243885  
Email: emma.white@leeds.gov.uk  
Our Ref: A80/PREM/00374/006

18th August 2015

Dear Sirs

**REQUEST FOR APPLICATION TO VARY A PREMISES LICENCE TO SPECIFY AN  
INDIVIDUAL AS THE DESIGNATED PREMISES SUPERVISOR.  
PREMISES: WYKEBECK ARMS, SELBY ROAD, LEEDS, LS9 0EW  
INCOMING DPS: ANGELA MARY SPENCER**

We are in receipt of your application to specify an individual as the Designated Premises Supervisor. We acknowledge receipt of the payment of £23.00.

I trust you have served a copy of your complete application on West Yorkshire Police.

Unless we receive any relevant representations your new licence will be despatched in 14 days. Angela Mary Spencer can operate as designated premises supervisor at the premises immediately.

As we currently hold your premises licence we recommend that you keep a copy of this letter on the premises and make it available to any authorised officer upon inspection of your premises.

If the appointment of the new Designated Premises Supervisor for these premises has resulted in a change of address on their personal licence then they are, under the Licensing Act 2003 required to notify the issuing authority.

Please do not hesitate to contact us should you require any further assistance.

Yours faithfully

Mrs Emma White  
Licensing Officer  
Entertainment Licensing



Ew

00374/005



**Leeds**  
**Application to vary a premises licence to specify an individual as designated premises supervisor**  
**Licensing Act 2003**

For help contact  
[entertainment.licensing@leeds.gov.uk](mailto:entertainment.licensing@leeds.gov.uk)  
Telephone: 0113 2474095

\* required information

**Section 1 of 4**

You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference  This is the unique reference for this application generated by the system.

Your reference  You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.

Are you an agent acting on behalf of the applicant?

Yes  No

Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.

**Applicant Details**

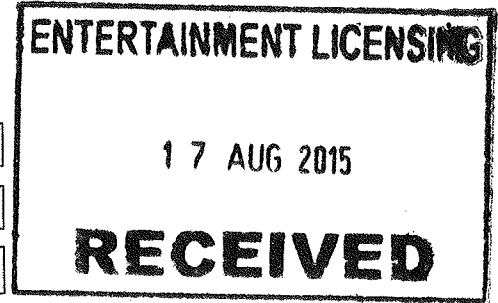
\* First name

\* Family name

\* E-mail

Main telephone number  Include country code.

Other telephone number



Indicate here if you would prefer not to be contacted by telephone

Are you:

Applying as a business or organisation, including as a sole trader  
 Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

**Applicant Business**

\* Is your business registered in the UK with Companies House?  Yes  No

\* Registration number

\* Business name

\* VAT number

\* Legal status

If your business is registered, use its registered name.  
Put "none" if you are not registered for VAT.

Continued from previous page...

Public house

**Section 3 of 4**

**SUPERVISOR**

**Full Name Of Proposed Designated Premises Supervisor**

\* First name

\* Family name

Personal licence number of proposed designated premises supervisor

Issuing authority of that licence

**Full Name Of Existing Designated Premises Supervisor**

First name

Family name

\* Would you like this application to have immediate effect under section 38 of the Licensing Act 2003?

Yes  No

\* Will the premises licence or relevant part of it be submitted with this application?

Yes  No

Reasons why the premises licence or relevant part of it will not be submitted with this application

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

Electronically, by the proposed designated premises supervisor  
 As an attachment to this variation

Reference number for consent form (if known)

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'

**Section 4 of 4**

**PAYMENT DETAILS**

**OFFICE USE ONLY**

Applicant reference number	<input type="text" value="LO026193"/>
Fee paid	<input type="text"/>
Payment provider reference	<input type="text"/>
ELMS Payment Reference	<input type="text"/>
Payment status	<input type="text"/>
Payment authorisation code	<input type="text"/>
Payment authorisation date	<input type="text"/>
Date and time submitted	<input type="text"/>
Approval deadline	<input type="text"/>
Error message	<input type="text"/>
Is Digitally signed	<input type="checkbox"/>

< Previous 1 2 3 4 Next >

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

I,

Angela Mary Spencer

[Full name of prospective premises supervisor]

of

15 Laleland Court  
Halton  
LS15 0BY

[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**

An application to vary a premises licence to specify an individual as designated premises supervisor under Section 37 of the Licensing Act 2003

[Type of application]

by

Enterprise Inns plc 3 Monkspath Hall Road Solihull B90 4SJ (registered number 2562808)

[Name of applicant]

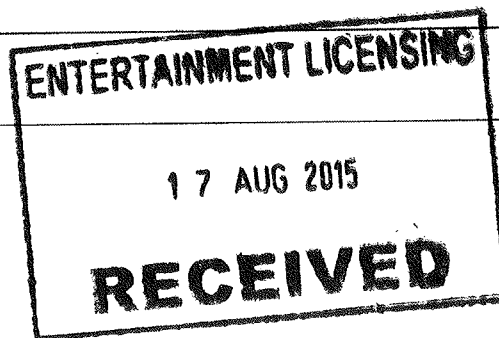
**relating to a Premises Licence**

[Number of existing licence, if any]

for

Wykebeck Arms  
Selby Road  
Halton  
Leeds  
West Yorkshire  
LS9 0EW

[Name and address of premises to which the application relates]



### ENQUIRY FORM

We confirm that some Constabularies ask for additional information in relation to applications submitted in your name. To save telephone calls, please complete the information below in order that we can provide this to them from the outset of our application.

(Please note this information is not required by law; however this information will speed up the application process).

<b>Name:</b>	Angela Mary Spencer
<b>Date of Birth:</b>	14/04/1962 00:00
<b>Place of Birth:</b>	Leeds
<b>Contact Number:</b>	07894 557232
<b>Personal Licence No:</b>	LLEDS/PERL/02880/06

Application ref: leeds-233888  
 Licence: Application to vary a premises licence to specify an individual as designated premises supervisor  
 Applicant name: Lucy Oldfield  
 Applicant email: licensing@enterpriseinns.com  
 Submitted on: 17/08/2015 16:34  
 Total fee: £23.00  
 Payment status: Paid  
 Northgate ref: IP/989599  
 Amount paid: £23.00  
 Fee outstanding: £0.00

**Tacit consent does not apply**

Process by: 01/09/2015  
 Status: Collected on 18/08/2015  
 Expires: Expires in 7 days on 25-08-2015

**Application**

Lucy Oldfield application form

**Supporting documents (3)**

Premises Licence Part A

Premises Licence Part B

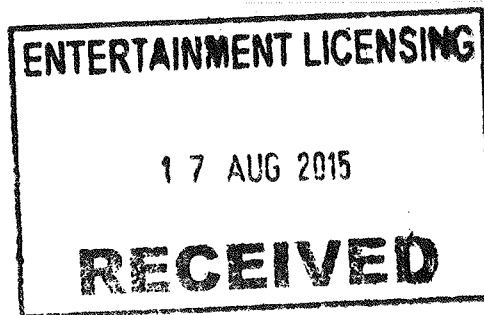
consent form of proposed premises supervisor

**Authority Reference**

Reference:

**Recent History**

Notification to licensing@enterpriseinns.com: Sent on 17/08/2015 16:37  
 Notification to entertainment.licensing@leeds.gov.uk: Sent on 17/08/2015 16:37  
 Payment Successful : at 17/08/2015 16:36  
 Marked as collected: on 18/08/2015 09:18 by emma.white@leeds.gov.uk



If you're encountering a problem and require assistance, please contact us at [licensing-authorities@digital.cabinet-office.gov.uk](mailto:licensing-authorities@digital.cabinet-office.gov.uk)

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Email: emma.white@leeds.gov.uk  
Our Ref: A80/PREM/00374/005

18th August 2015

Dear Sirs

**APPLICATION TO TRANSFER A PREMISES LICENCE.**  
**PREMISES: WYKEBECK ARMS, SELBY ROAD, LEEDS, LS9 0EW**  
**INCOMING LICENCE HOLDER: ENTERPRISE INNS PLC**

We are in receipt of your application to transfer a premises licence. We acknowledge receipt of the payment of £23.00.

I trust you have served a copy of your complete application on West Yorkshire Police.

Unless we receive any relevant representations your new licence will be despatched in 14 days.

As we currently hold your premises licence we recommend that you keep a copy of this letter on the premises and make it available to any authorised officer upon inspection of your premises.

Please do not hesitate to contact us should you require any further assistance.

Yours faithfully

Mrs Emma White  
Licensing Officer  
Entertainment Licensing





Ew

00374/005



Leeds  
Application to transfer premises licence  
Licensing Act 2003

For help contact  
entertainment.licensing@leeds.gov.uk  
Telephone: 0113 2474095

\* required information

Section 1 of 6

You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference

Not Currently In Use

This is the unique reference for this application generated by the system.

Your reference

LO026193

You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.

Are you an agent acting on behalf of the applicant?

- Yes  No

Put "no" if you are applying on your own behalf or on behalf of a business you own or work for

Applicant Details

\* First name

Lucy

\* Family name

Oldfield

\* E-mail

licensing@enterpriseinns.com

Main telephone number

0121 256 3076

Include country code.

Other telephone number

Indicate here if you would prefer not to be contacted by telephone

Are you:

- Applying as a business or organisation, including as a sole trader  
 Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

Applicant Business

\* Is your business registered in the UK with Companies House?

- Yes  No

\* Registration number

2562808

\* Business name

Enterprise Inns plc

If your business is registered, use its registered name.

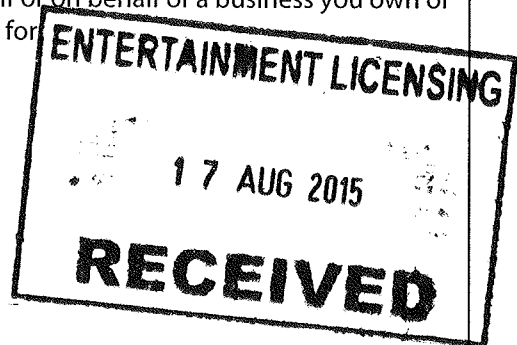
\* VAT number

- 670313167

Put "none" if you are not registered for VAT.

\* Legal status

Public Limited Company



Continued from previous page...

Public house

Telephone number at the premises if any

**Section 3 of 6**

**APPLICATION DETAILS**

In what capacity are you applying for the premises licence to be transferred to you?

- An individual or individuals
- A limited company
- A partnership
- An unincorporated association
- A recognised club
- A charity
- The proprietor of an educational establishment
- A health service body
- A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- The chief officer of police of a police force in England and Wales
- Other (for example a statutory corporation)

**Please confirm the following:**

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
- I am making the application pursuant to a statutory function
- I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative

**Section 4 of 6**

**NON INDIVIDUAL APPLICANTS**

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

Continued from previous page...

Have you attached the consent form signed by the existing premises licence holder?

Yes       No

If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003)?

Yes       No

Have you attached the previous licence?

Yes       No

Please enter your reasons

If premises licence is being posted to me, I will forward on once received.

## Section 6 of 6

### PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

This formality requires a fixed fee of £23

### DECLARATION

\* I will make payment of the fee on submission of this application.

I have attached, or will post to Leeds City Council, the consent form completed by the existing premises licence holder, or I will ensure the existing premises licence holder submits the consent form electronically.

\* I have attached, or will post to Leeds City Council, the premises licence, or the relevant part of it or explanation.

\* I understand that if I do not comply with the above requirements my application will be rejected

I understand that Leeds City Council is under a duty to protect the public funds it administers, and to this end may use the information I have provided on my application for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

\* Full name

\* Capacity

**Consent of premises licence holder to transfer**

I/We

Dean Richard Walker

[Full name of premises licence holder(s)]  
the premises licence holder of premises licence number

PREM/00374/002

[Insert Premises Licence number]  
relating to

Wykebeck Arms  
Selby Road  
Halton  
Leeds  
West Yorkshire  
LS9 0EW

[Name and address of premises to which the application relates]  
hereby give my consent for the transfer of premises licence number

PREM/00374/002

[Insert Premises Licence number]  
To

Enterprise Inns plc (2562808)

[Full name of transferee]

Signed



Name (please print)

Dean Richard Walker

Date

17<sup>th</sup> August 2015

**ENTERTAINMENT LICENSING**  
17 AUG 2015  
**RECEIVED**