Name: Mr NIVETHAN <>

Address: 6 Temple Hill Square
Dartford
DA1 5HZ

Email address: NIRUSAN2@OUTLOOK.COM

Contact number:

Premises Details

Full name(s) of premise licence holder: VELUPPILLAI ALVAPPILLAI

Premises licence number: 6944

Premises name: MANOR WAY SUPERSTORE

Premises address: 73 Manor Way
Deeping St James
PETERBOROUGH
PE6 8PX

Telephone number: 07305856967

Email address: NIRUSAN2@OUTLOOK.COM

Describe the premises (for example, what type of premises it is): LOCAL CONVENIENCE STORE

Proposed Designated Premises Supervisor

First name: NIRUSAN

Last name: SIVATHARAN

Nationality: BRITISH

Place of birth: LANGENFELD

Date of birth: 28/Jan/1999

Personal licence number of proposed designated premises supervisor: 24/00236/LAPER

Issuing authority of that licence: DARTFORD BOROUGH COUNCIL

Existing Designated Premises Supervisor

First name: VELUPPILLAI

Last name: ALVAPPILLAI

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

Date you would like this application to have effect under section 38 of the Licensing Act 2003:

Will the premises licence or relevant part of it be uploaded with this application? Yes

Upload of premise licence or relevant part: 2

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

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

Reference number for contact form (if known):

Postal address for correspondence associated with this application: Unit B003
Trident Business Centre
89 Bickersteth Road
London
SW17 9SH

Correspondence telephone number: 07803903897

Correspondence email address: contact@arkalicensing.co.uk

The customer agrees with the statements on the form: Yes

Full name of person submitting application: NIRA SURESH

Applicant's position in the business: LICENSING AGENT