[Insert name and address of relevant licensing authority and its reference number (optional)]

Application for a minor variation to a premises licence or club premises certificate under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the Guidance Notes at the end of the form, especially Note 1.

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 in black ink. Use additional sheets if necessary.

Once completed please send your application to the relevant licensing authority. You may wish to keep a copy of the completed form for your records.

(Insert name(s) of applicant)

Sainsbury's Supermarkets Ltd

| | e premises licence holder(s)/club holding a club premises certificate, apply to vary a premises under section 41A/club premises certificate under section 86A of the Licensing Act 2003 for a described in Part 1 below. | |
|---|--|--|
| Part 1 – Premises details | | |
| Postal address of premises (or, if none, ordnan | ce survey map reference, or description) | |
| Sainsbury's Brooklands Way | | |
| Post town East Grinstead | Postcode RH19 1DD | |
| Telephone number at premises (if any) | | |
| Premises licence number/club premises certifi | cate number | |
| PWA0011 | | |
| Brief description of premises (Please see Gu | idance Note 2) | |
| A supermarket. | | |
| | | |

Part 2 – Applicant Details

| I am/we are the premises licence holder/club premises cappropriate) | ertificate holder. (Pl | ease delete as | |
|--|---|-------------------|-----------------|
| Contact phone number in working hours (if any) | | | |
| Applicant Postal address IF DIFFERENT FROM PRE | EMISES ADDRESS | | |
| Post town | Postcode | | |
| Please provide email address if you would prefer us to | contact you by ema | ail (optional) | |
| Part 3 – Proposed variation(s) Do you want the proposed variation to have effect as so | on as possible? 🔀 Y | ∕es □ No | Please tick |
| | | DDMMYY | 7YY |
| If not, from what date do you want the variation to take | effect? | | |
| Do you want the proposed variation to have effect in relevy? (Please see Guidance Note 3) | ation to the introduc | ction of the late | |
| Please describe the proposed variation(s) in detail in consider that they could not have an adverse effect o objectives (See Guidance Note 1). This should includ licensable activities will be taking place indoors or or | n the promotion of e whether new or in | any of the lice | ensing ls of |
| Details of proposed variation(s) (Please see Guidanc | e Note 4) | | |
| The layout of the premises is to be altered as shown application. | on the plan, which | ı accompany t | his |
| The alterations are minor and are mainly in relatio other very minor changes. | n to updating the ti | ill area, along | with |
| The premises will not be increasing in size. | | | |
| The licence holder believes that the alterations will licensing objectives. | not have an advers | e impact on tl | he four |
| Details of proposed variation(s) (Continued) | | | |

| Part 4 – Operating Schedule | |
|---|-------------|
| Please tick those parts of the Operating Schedule which would be subject to change if this application to vary were successful. | |
| Provision of regulated entertainment (please read guidance note 5) Please tick all that apply | |
| a. plays b. films c. indoor sporting events d. boxing or wrestling entertainment e. live music f. recorded music g. performances of dance h. anything of a similar description to that falling within (e), (f) or (g) | |
| Provision of late night refreshment | |
| Supply of alcohol | |
| (Note that this can only relate to reducing licensed hours, or moving them without any overall increase between 7am and 11pm) | |
| Please tick to indicate you have enclosed the following: | |
| I have enclosed the premises licence/club premises certificate | \boxtimes |
| I have enclosed the relevant part of the premises licence/ club premises certificate | |
| I have included a copy of the plan (this is necessary if the proposed variation will affect the layout) | \boxtimes |

If you have not ticked one of the previous three boxes, please explain why in the box below.

| Reas | ons why you have not enclosed the premises licence/club premises certificate or | |
|--------|--|-------------|
| | ant parts. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Any | further information to support your application. (See Guidance Note 6) | |
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| | | |
| | | |
| | KLIST: | |
| Please | tick to indicate agreement | |
| • | | |
| | | |
| | | |
| • | I have made or enclose payment of the fee. | \boxtimes |
| | | |
| | | |
| • | I have not made or enclosed payment of the fee because this application has been made | in |
| | relation to the introduction of the late night levy. | Ш |
| • | I have enclosed the plan, if appropriate, of the premises in scale [1mm to 100mm], unle | 222 |
| • | | \boxtimes |
| | oner who agreed with the nectioning damentay. | |
| • | I have enclosed the premises licence/club premises certificate or relevant part of it or | |
| | provided an explanation. | \boxtimes |
| | | |
| • | I understand that if I do not comply with the above requirements my application will be | |
| | rejected. | \boxtimes |
| | | |

I understand that I must now advertise my application for a continuous period beginning on the first working day after the day on which the application was given to the relevant licensing authority and ending at the expiry of the ninth consecutive working day after that day.

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

Part 5 – Signatures and Contact Details

(See Guidance Note 7)

<u>Premises Licence</u>: Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Note 8). If signing on behalf of the applicant, please state your name and in what capacity you are authorised to sign:

| Signature | Winchworth Shenord Up |
|-----------|-----------------------|
| Date | 01 May 2024 |
| Capacity | Agent |

Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (See Guidance Note 9). If signing on behalf of the applicant, please state in what capacity.

| Signature | |
|-----------|--|
| Date | |
| Capacity | |

Where the premises are a club

I (insert full name) authority to bind the club.

make this application on behalf of the club and have

| Signature | |
|-----------|--|
| Date | |
| Capacity | |

| Contact name (where not previou this application. (See Guidance N | sly given) and address for correspondence associated with tote 10) |
|---|--|
| Post town | Postcode |
| Telephone number (if any) | If you would prefer us to correspond with you by email your email address (optional) |





