

Sevenoaks Consent to be designated Licensing Act 2003 For help contact licensing@sevenoaks.gov.uk Telephone: 01732 227004

* required information

Section 1 of 3		
You can save the form at any t	ime 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	219	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		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	Kavitha	
Family name	Sivothayan	
E-mail address	contact@arkalicensing.co.uk	
Main telephone number	0203 405 1886	Include country code.
Other telephone number	07803903897	
☐ Indicate here if the appl	icant would prefer not to be contacted by telep	phone
Is the applicant:		
 Applying as a business or organisation, including as a sole trader 		A sole trader is a business owned by one
 Applying as an individual 		person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
Is the applicant's business registered in the UK with Companies House?	← Yes ← No	
Is the applicant's business registered outside the UK?		
Business name	Kwik E Mart	If the applicant's business is registered, use its registered name.
VAT number	None	Put "none" if the applicant is not registered for VAT.

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Legal status	Sole Trader	ECC TO COME TO STATE OF STATE
Applicant's position in the business	Owner Manager	A THE PERSON OF
Home country	United Kingdom	The country where the applicant's headquarters are.
Applicant Business Address	rosium desperato e la companya de la	If the applicant has one, this should be the
Building number or name	64	applicant's official address - that is an address required of the applicant by law for
Street	Lower Stone St	receiving communications.
District	- 01 1-28(6) 8	
City or town	Maidstone	Cargo sectific test and a second
County or administrative area	a l	
Postcode	ME15 6NA	
Country	United Kingdom	1 4 7 4 3 4 30
First name Family name	Suresh	
Agent Details		
Family name	Kanapathi	
E-mail address	contact@arkalicensing.co.uk	
E-mail address Main telephone number		Include country code.
	contact@arkalicensing.co.uk	Include country code.
Main telephone number Other telephone number	contact@arkalicensing.co.uk 02034051886	Include country code.
Main telephone number Other telephone number	contact@arkalicensing.co.uk 02034051886 07803903897	Include country code.
Main telephone number Other telephone number Indicate here if you wo Are you:	contact@arkalicensing.co.uk 02034051886 07803903897	A sole trader is a business owned by one
Main telephone number Other telephone number Indicate here if you wo Are you:	contact@arkalicensing.co.uk 02034051886 07803903897 uld prefer not to be contacted by telephone ness or organisation, including a sole trader	
Main telephone number Other telephone number Indicate here if you wo Are you: An agent that is a busin	contact@arkalicensing.co.uk 02034051886 07803903897 uld prefer not to be contacted by telephone ness or organisation, including a sole trader	A sole trader is a business owned by one
Main telephone number Other telephone number Indicate here if you wo Are you: An agent that is a busin A private individual act	contact@arkalicensing.co.uk 02034051886 07803903897 uld prefer not to be contacted by telephone ness or organisation, including a sole trader ting as an agent	A sole trader is a business owned by one
Main telephone number Other telephone number Indicate here if you wo Are you: An agent that is a busin A private individual act Agent Business Is your business registered in the UK with Companies	contact@arkalicensing.co.uk 02034051886 07803903897 uld prefer not to be contacted by telephone ness or organisation, including a sole trader ting as an agent	A sole trader is a business owned by one
Main telephone number Other telephone number Indicate here if you wo Are you: An agent that is a busin A private individual act Agent Business Is your business registered in the UK with Companies House?	contact@arkalicensing.co.uk 02034051886 07803903897 uld prefer not to be contacted by telephone ness or organisation, including a sole trader ting as an agent Yes No	A sole trader is a business owned by one
Main telephone number Other telephone number Indicate here if you wo Are you: An agent that is a busin A private individual act Agent Business Is your business registered in the UK with Companies House? Registration number	contact@arkalicensing.co.uk 02034051886 07803903897 uld prefer not to be contacted by telephone ness or organisation, including a sole trader ting as an agent Yes No 09036487	A sole trader is a business owned by one person without any special legal structure. If your business is registered, use its

Continued from previous page	Control Control	William Gathering
Your position in the business	Consultant	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Registered Address		Address registered with Companies House.
Building number or name	Trident Business Centre, B003	mont Feediness
Street	89 Bickersteth Road	
District		
City or town	London	
County or administrative area		
Postcode	SW17 9SH	
Country	United Kingdom	8860 10 (P.)
		2 10 10 10 10 10 10 10 10 10 10 10 10 10
Section 2 of 3		
CONSENT		r engages
Name Of Proposed Premises	Supervisor	
First name	Gregory John	edia cita
Family name	Millener	
Address Of Proposed Premis	es Supervisor	
Building number or name	29	
Street	Chancery Lane	emanthin to
District		Acuteos Or Para
City or town	Maidstone	
County or administrative area		
Postcode	ME15 6EG	
Country	United Kingdom	
	consent to be specified as the designated prer licence to be granted or varied in respect of thi	s application concerning the supply of alcohol
Type of application	New Premises Licence	For instance 'Application for a premises licence'
Is the application or variation that this consent is being submitted in connection with being supplied electronically to the authority		
Yes	○ No ○ Don't know	Can Christian

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# 2 7 2 1 2		known)
- Or Train Adolor 97" - I		on or variation form is already
		its applicant for the form's ce' or 'your reference'.
we told appropriate of the	system referen	ce of your reference.
Premises Licence Holder		
Name	Kavitha Sivothayan	Transfer in the second
Address Of Premises		
Building number or name	64	2004-0
Street	Lower Stone St	
District		
City or town	Maidstone	
County or administrative are	a	
Postcode	ME15 6NA	
Premises		
Premise licence number		107/3/2007 (A. 1977)
Name of premises	Kwik E Mart	moj vieskij
I also confirm that I am apply	ring for, intend to apply for or curi	rently hold a personal licence, details of which I set out below
Personal licence number		
Personal licence issuing authority name	Sevenoakes Council	1343 \$43500s7
Address Of Personal Licence	e Issuing Authority	
Building number or name		Trendstate of the same and the
Street		
District		See to the second
City or town		
County or administrative are	a	TS-TENT TO THE CONTROL OF THE CONTRO
Postcode		
Contact Details Of Persona	Licence Issuing Authority	
Telephone number		The analysis are a second of the second of t
Section 3 of 3		
DECLARATION		

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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	Suresh Kanapathi		
Capacity	Agent		
Date	03 / 11 / 2015 dd mm yyyy		
	Add another signatory		
Once you're finished you need to do the following: 1. Save this form to your computer by clicking file/save as 2. Go back to https://www.gov.uk/apply-for-a-licence/premises-licence/sevenoaks/change-7 to upload this file and continue with your application. Don't forget to make sure you have all your supporting documentation to hand.			
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OFFICE USE ONLY			
Applicant reference number	219		
Fee paid			
Payment provider reference			
ELMS Payment Reference			
Payment status			
Payment authorisation code			
Payment authorisation date			
Date and time submitted			
Approval deadline			
Error message			
Is Digitally signed			