

Consent of premises licence holder to transfer

I/we [full name of premises licence holder(s)]_____

the premises licence holder of premises licence number

[insert premises licence number]_____ relating to

[name and address of premises to which the application relates]_____

hereby give my consent for the transfer of premises

licence number [insert premises licence number]_____ to

[full name of transferee]_____

Signed_____

Name (please print)_____

Dated_____

Please return this form to:-

The Licensing Team, Central Services Department,
Town Hall,
Great Yarmouth, NR30 2QF