

Blackpool Council

CONSENT OF PREMISES LICENCE HOLDER TO TRANSFER

Applicant(s) Name:

Built Environment

Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

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SCHEDULE 11

Form of Consent of Premises Licence Holder to transfer

Full Name and Title of Current Premises Licence holder:

Premises Licence Number:

Name and Address of Premises to which the transfer relates:

Full name of transferee:

I hereby give my consent for the transfer of the above premises licence number to the above named transferee.

Signed:	
Name:	
Date:	