

and any premises licence to be granted or varied in respect of this application made by

MRS EVELINE BUMA VULIELIE
[name of applicant]

concerning the supply of alcohol at

72 BRAMBLES STREET
CX1 2HT COVENTRY
WEST MIDLANDS

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

210000286
[insert personal licence number, if any]

Personal licence issuing authority

COVENTRY CITY COUNCIL
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

MRS EVELINE BUMA VULIELIE

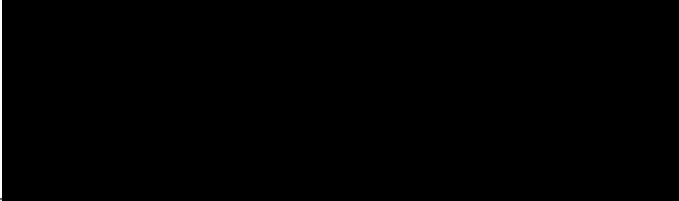
Date

15 / 05 / 2020

Consent of individual to being specified as premises supervisor

I MRS EVELINE BUMA VULIELIE
[full name of prospective premises supervisor]

of



[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

[type of application]

by

[name of applicant]

relating to a premises licence *[number of existing licence, if any]*

for

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