

## Consent of individual to being specified as premises supervisor

	ANISSA DAMOUSSI
1	[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

## NEW PREMISES LICENCE APPLICATION

[type of application]

by

## ANISSA DAMOUSSI

[name of applicant]

relating to a premises licence

UNDER APPLICATION.

[number of existing licence, if any]

for SO MARRAKECH 25 MARKET STREET ALTRINCHAM WA14 1QS

[name and address of premises to which the application relates] and any premises licence to be granted or varied in respect of this application made by

## ANISSA DAMOUSSI

[name of applicant]

concerning the supply of alcohol at

SO MARRAKECH 25 MARKET STREET ALTRINCHAM WA14 1QS

[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

24/01210

24/01210 [insert personal licence number, if any]

Personal licence issuing authority

STOCKPORT COUNCIL

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

Signed		
Name (please print)	ANISSA DAMOUSSI	
Date	24/09/2024.	

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