



St. Helens
Council

Premises Licence Holder Consent to Transfer

I/We (full name of premises licence holder(s):

the premises licence holder of premises licence number (insert premises licence number):

..... Postcode:

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: Date:

Print name:

Completed application forms should be returned together with the appropriate fee to:

Licensing and Land Charges

Wesley House, Corporation Street, St. Helens WA10 1HF

Tel: 01744 676770

Email: generallicensing@sthelens.gov.uk