

**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 .....

**Return to:  
Licensing Team  
North Kesteven District Council  
Kesteven Street  
Sleaford  
Lincolnshire  
NG34 7EF**