

Licensing Team
Folkestone and Hythe District Council
Civic Centre
Castle Hill Avenue
Folkestone
Kent CT20 2QY
Telephone: 01303 853660



Consent of premises licence holder to transfer

I/we
[full name of premises licence holder(s)]

.....
[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