

## Notice of Surrender of Premises Licence

I	(Print Name)
of (address)	
Your position or title	
Tel No	Mobile No
ICI NO	Mobile No
Email	
Hereby give notice of the surrender of t	the Premises Licence:-
Premises Licence Number	
relating to:	
Name of Premises	
(as printed on licence)	
Address of Premises	
	Post Code

Name of Licence Holder
(as printed on licence)
Address of Licence Holder
Post Code
I confirm that I am authorised to serve this Surrender Notice in respect of the above
licensed premises and understand that the Notice will take effect as soon as it is
received by the Licensing Authority.
I also understand the previously licensed activities permitted in respect of this licence
and at the premises will automatically cease at this time.
☐ Landon the Dramines License
☐ I enclose the Premises Licence
☐ I am unable to enclose the Premises Licence*
Signature Date
*Please provide a statement of reasons why you are unable to return the Premises Licence