

FOR OFFICE USE ONLY	
LALPAC APPLICATION NO.	
LICENCE NO.	
OFFICER INITIALS	



# ALLERDALE BOROUGH COUNCIL

## PART B – CONSENT OF PREMISES LICENCE HOLDER TO TRANSFER

**Applicant Name:**

Allerdale – a great  
place to live, work  
and visit

Allerdale Borough Council  
Allerdale House  
Workington  
Cumbria  
CA14 3YJ  
Tel: 01900 702720  
Fax 01900 702698

ALLERDALE BOROUGH COUNCIL

**PART B**

**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 .....