SOUTHAMPTON & EASTLEIGH LICENSING PARTNERSHIP

DESIGNATED PREMISES SUPERVISOR (DPS) LETTER OF AUTHORISATION

To whom it may concern:		
<u> </u>	Designated Premises Supervisor (DPS), on in a position of authority on the pren	
Premises Licence Number: Personal Licence Number:		
licensing law and the licence	named personnel to sell and supply a conditions attached to the licence. Thi ny absence when I am away from the telephone number:	is being either when I am
	w am aware of and accept my respon deavour to comply in accordance with	
Name	Personal Licence Number (If Applicable)	Non Personal Licence Holder (Please Tick)
DESIGNATED PREMISES SUPERVI Name:	SOR	
Signature:		
Date:		