

## **Consent of Premises Licence Holder to transfer**

I/we		
[full name	of premises licence holder(s)]	
the premises lice	ence holder of premises licence number	
		[insert premises licence number]
relating to		
[name and addr	ess of premises to which the application i	relates]
hereby give my consent for the transfer of premises licence number		
[insert premises	licence number]	
to		
[full name of transferee].		
Signed		
Print name		
Date		

Please return this form to: The Licensing Department of Mansfield District Council, Civic Centre, Chesterfield Road South, Mansfield, Nottinghamshire. NG19 7BH

## **Privacy Notice**

We will use the information provided by you for assessing your application. The basis under which the Council uses personal data for this purpose is a Legal Obligation. **The information provided by you includes the following special categories of personal data:** 

## • genetic/biometric data

Information in these categories is used by the Council on the basis that such use is necessary for reasons of substantial public interest, and in accordance with the provisions of the Data Protection Act 2018.

The information that you have provided will be kept in accordance with the Council's retention schedule which can be found at <a href="https://www.mansfield.gov.uk/privacy">https://www.mansfield.gov.uk/privacy</a>

The information provided by you may also be used for the purpose of any other function carried out by the Council. Information about these functions and the legal basis on which information is used by them, your rights and the Council's Data Protection Officer (DPO) can be found on the Council's detailed privacy notice which can be found at <a href="https://www.mansfield.gov.uk/privacy">https://www.mansfield.gov.uk/privacy</a> or requesting a copy by writing to:

The Data Protection Officer Mansfield District Council Chesterfield Road South, Mansfield, Nottinghamshire NG19 7BH.