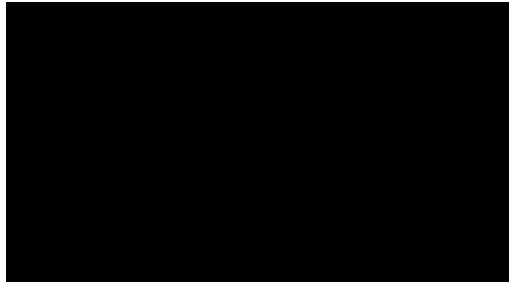


Consent of individual to being specified as premises supervisor

I MR CHIRAGH SINGH SACHDEV
[full name of prospective premises supervisor]

of



[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

NEW PREMISES APPLICATION
[type of application]

by

MR CHIRAGH SINGH SACHDEV.
[name of applicant]

relating to a premises licence

N/A
[number of existing licence, if any]

for

DR CLOUD FOOD & WINE
26 HIGH STREET.
LEATHERHEAD
KT22 8AW

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

MR CHIRAGH SINGH SACHDEV

[name of applicant]

concerning the supply of alcohol at

DR CLOUD FLOOD & WINE
26 HIGH STREET.
LEATHERHEAD
KT22 8AW

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

TO BE APPLIED

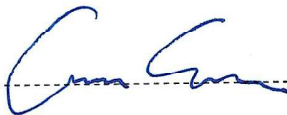
[insert personal licence number, if any]

Personal licence issuing authority

LONDON BOROUGH OF WANDSWORTH.

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

CHIRAGH SINGH SACHDEV.

Date

29/10/2025.