

Licensing Board



Clackmannanshire
Council

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Licensing (Scotland) Act 2005, Section 29 Application for Variation of Premises Licence

To:

Clerk to the Licensing Board
Clackmannanshire Council
Kilncraigs
Alloa
FK10 1EB

If you are Completing this Form by Hand, Please Write Legibly in Block Capitals using **BLACK INK**. Please Ensure the Completed Application is Signed by the Applicant, Dated and Returned to the Above Address along with the Fee and the Original Licence or a Statement of Reasons as to why the Original Licence Cannot be Produced.

APPLICANT INFORMATION

Question 1

Name, Address, Postcode and Licence Number of Premises.

Peppe's, 12 Mar Place, Alloa, FK10 2AB
Premises Licence No: CG093

Question 2

Full Name, Address, Postcode, Telephone Number and Email Address of the Current Licensee or the Applicant if Different.



Candleriggs Inns Ltd, Lime Treet House, Castle Street, Alloa, FK10 1EX

DETAILS OF VARIATION

Question 3

Brief Details of Variation (Continue on Separate Sheet if Necessary)

Variation to layout plan to remove pool bar area as per attached plan number: ASD/998/1.01B

Variation to layout plan to add external area to the licensed footprint as per attached plan number: ASD/998/1.01B

Removing Children's and young persons access.

Variation Licensing hours to Sunday to Thursday to 12 midnight and Friday and Saturdays until 1am.

OPERATING PLAN

Question 4

Do you Propose to Vary any of the Information Within the Operating Plan Contained in the Licence?

YES/NO^x

If Yes Please Complete and submit New Operating Plan to include the Proposed Variations.

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LAYOUT PLAN

Question 5

Do you Propose a Variation to the Layout Plan Contained in the Licence?

YES/NO

If Yes Please Supply **6 Copies** of the New Layout Plan Conforming to Paragraph 5 of The Premises Licence (Scotland) Regulations 2007.

CONDITIONS

Question 6

Do you propose a variation to any of the conditions to which the licence is subject?

YES/NO

If Yes please give details of the proposed variation below

Please Note That You Cannot Vary any Condition Which Is on Your Licence By Virtue Of Section 27(1) Of The Licensing (Scotland) Act, 2005 (Mandatory Conditions).

PREMISES MANAGER

Question 7

If you Propose to Vary the Information Contained in the Licence Relating to the Premises Manager . Please Provide the following information.

Name, Address and Personal Licence Details (Number and Issuing Board) of the Existing Premises Manager

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If only the existing Premises Manager's Personal Details have Changed
Please Provide details

If there is a Change of Premises Manager Please Provide the following:-.

Name and Address of the Proposed Premises Manager

Date and Place of Birth of the Proposed Premises Manager

Email Address and Telephone Number of the Proposed Premises Manager

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Personal Licence

Date of Issue	Name of Licensing Board Issuing	Reference No. Of Personal Licence

Is the Variation Relating to the change of Premises Manager to Take Effect During the Application Period

YES/NO

If the Answer to the Above Question is NO Please Provide Below the Date the Variation is to Take Effect.

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICANT

If Signing on Behalf of the Applicant Please State in What Capacity.

The Contents of This Application Are True to the Best of my Knowledge and Belief.

Signature..... *Hill Brown* Date24/01/2024

* (See Note Overleaf)

Capacity ~~APPLICANT~~ **AGENT** (Delete as appropriate)

Telephone Number and Email Address of Signatory

.....

.....

.....

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*** Data Protection Act 1998**

The Information on this Form May be Held on an Electronic Public Register Which May be Available to Members of the Public on Request

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Checklist	
Fee enclosed	x
Application signed/dated	x
Original Licence enclosed or a Statement of reasons for failing to produce the Licence	x
New Operating Plan Enclosed	x
New Layout Plan Enclosed	x



OPERATING PLAN

Peppe's, 12 Mar Place, Alloa

Licensing (Scotland) Act 2005, section 20(2)(b)(i)

Question 1

STATEMENT REGARDING ALCOHOL BEING SOLD ON PREMISES/OFF PREMISES OR BOTH

1(a) Will alcohol be sold for consumption solely ON the Premises?	YES /NO*
1(b) Will alcohol be sold for consumption solely OFF the Premises?	YES YES /NO*
1(c) Will alcohol be sold for consumption both ON and OFF the Premises?	YES/ NO *

*Delete as appropriate

Question 2

STATEMENT OF **CORE** TIMES WHEN ALCOHOL WILL BE SOLD FOR CONSUMPTION **ON** PREMISES

DAY	ON CONSUMPTION	
	OPENING TIME	TERMINAL HOUR
MONDAY	11:00am	12 Midnight
TUESDAY	11:00am	12 Midnight
WEDNESDAY	11:00am	12 Midnight
THURSDAY	11:00am	12 Midnight
FRIDAY	11:00am	01:00am
SATURDAY	11:00am	01:00am
SUNDAY	11:00am	12 Midnight

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Question 3

STATEMENT OF **CORE** TIMES WHEN ALCOHOL WILL BE SOLD FOR CONSUMPTION **OFF** PREMISES

DAY	ON CONSUMPTION	
	OPENING TIME	TERMINAL HOUR
MONDAY	11:00am	10:00pm
TUESDAY	11:00am	10:00pm
WEDNESDAY	11:00am	10:00pm
THURSDAY	11:00am	10:00pm
FRIDAY	11:00am	10:00pm
SATURDAY	11:00am	10:00pm
SUNDAY	11:00am	10:00pm

Question 4

SEASONAL VARIATIONS

Does the Applicant intend to operate according to Seasonal Demand	YES/NO*
*If YES – provide details	

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Question 5

PLEASE INDICATE THE OTHER ACTIVITIES OR SERVICES THAT WILL BE PROVIDED ON THE PREMISES IN ADDITION TO SUPPLY OF ALCOHOL

1	2	3	4
	Please Confirm	To Be Provided During Core Licensed Hours	Be Provided Outwith Core Licensed Hours
	YES/NO	YES/NO	YES/NO
5(a) Activity			
Accommodation	N	N/A	N/A
Conference Facilities	Y	Y	N
Restaurant Facilities	N	N	N
Bar Meals	N	N	N
5(b) Activity - Social Functions Including:			
Receptions Including Wedding, Funerals, Birthdays, Retirements Etc.	Y	Y	N
Club of Other Group Meetings etc.	Y	Y	N
5(b) Activity - Entertainment Including:			
Recorded Music (see 5g)	Y	Y	N
Live Performance (see 5g)	Y	Y	N
Dance Facilities	Y	Y	N
Theatre	N	N	N
Films	Y	Y	N
Gaming	Y	Y	N

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Indoor/Outdoor Sports	Y	Y	N
Televised Sport	Y	Y	N
5(d) Activity			
Outdoor Drinking Facilities	Y	Y	N
5(e) Activity			
Adult Entertainment*	N	N	N

* Adult Entertainment means any form of entertainment which-
 (a) involves a person performing an act of an erotic or sexually explicit nature; and
 (b) is provided wholly or mainly for the sexual gratification or titillation of the audience

Where you have answered **YES** in respect of any entry in Column 4 above, please provide further details below

5(f) Any Other Activities

If you propose to provide any activities other than those listed in 5(a) – (e) please provide details or further information in the box below

Occasional Quiz nights and Charity Race Night events.

5(g) Late Night Premises Opening after 1.00am

Where You Have Confirmed That You Are Providing Live or Recorded Music Will The Decibel Level Exceed 85dB	YES/NO*
When Fully Occupied Are There Likely To Be More Customers Standing Than Seated	YES/NO*

*Delete As Appropriate

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Question 6 (On-Sales only)



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CHILDREN AND YOUNG PERSONS

6(a)	When Alcohol Is Being Sold For Consumption On The Premises Will Children Or Young Persons Be Allowed Entry	NO
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6(b) Where the answer to 6(a) is YES provide statement of the **TERMS** under which they will be allowed entry

6(c) Provide Statement Regarding the **AGES** of children or Young Persons to be Allowed Entry

6(d) Provide Statement Regarding the **TIMES** During Which Children and Young Persons will be Allowed Entry



6(e) Provide Statement Regarding the **PARTS** of the Premises to Which Children and Young Persons Will Be Allowed Entry

Question 7

CAPACITY OF PREMISES

What is the Proposed Capacity of the Premises to Which This Application Relates?

Onsales - 74

Question 8

PREMISES MANAGER (**NOTE Not Required Where Application is For Grant of Provisional Premises Licence**)

Personal Details

8(a) Name

Suzanne Dickson

8(b) Date of Birth

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8(c) Contact Address

8(d) Email Address

8(e) Personal Licence

Date of Issue	Name of Licensing Board Issuing	Reference No. Of Personal Licence

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICANT

If Signing on Behalf of the Applicant Please State in What Capacity.

The Contents of This Operating Plan Are True to the Best of my Knowledge and Belief.

Signature *Hill Brown* * (See Note Below)

Date 24/01/2024

Capacity AGENT
(Delete as appropriate)

Telephone Number and Email Address of Signatory

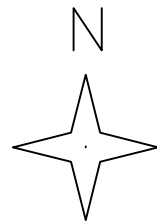
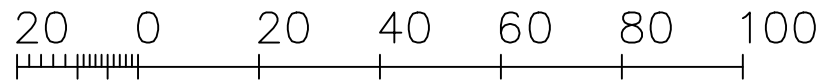
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*** Data Protection Act 1998**

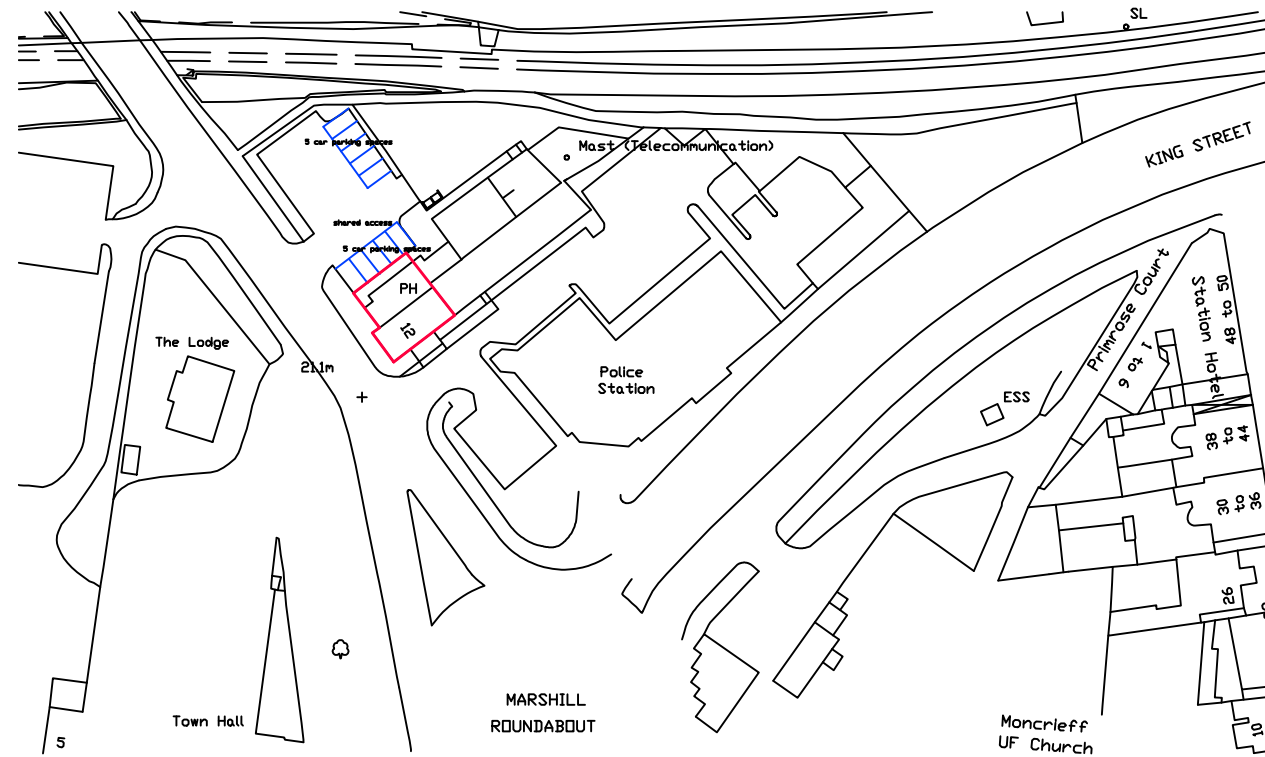
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LICENSING DRAWING



Metres

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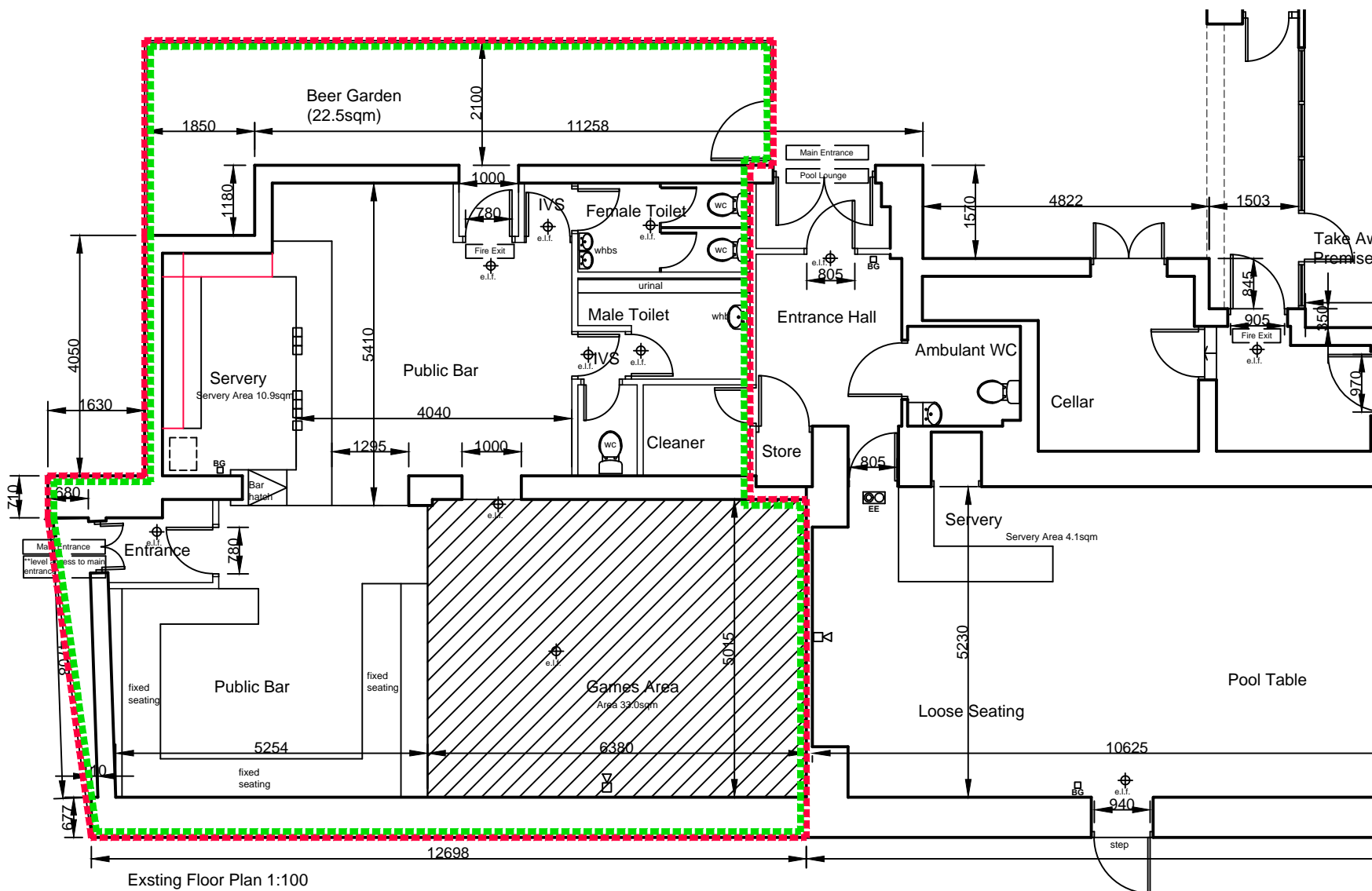


Notes

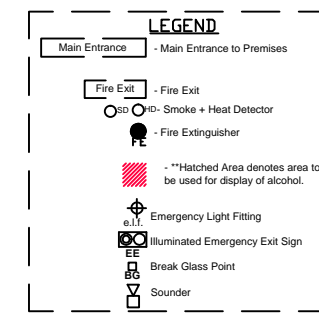
1. Do not scale from drawings.
2. All dimensions to be checked on site prior to ordering materials.
3. Drawings should be read in conjunction with all structural and services engineer drawings and specifications.

REVISIONS

- A 21st Feb 22 Cellar removed from licensing area and alcohol display deleted
- B 20th Sept 23 Beer Garden area highlighted, Children note amended



Sanitary Schedule (Occupancy Load Factor 1.0)
 Total Floor Area (public): 74.0sqm
 Total number of persons: 74
 50% male and female
 Requirements:
 Male: 1wc + 2 urinal + 2 whb
 Female: 3 wc + 3 whb
 Provision:
 Male: 1wc + 4 urinals (trough) + 2 whb
 Female: 2wc + 2 whb



All facilities mentioned in Question 5(b) and 5(c) of the Operating Plan will take place in all parts of the Premises.

Children and Young Persons have access to all parts of the Premises as set out in Question 6(e) of the Operating Plan subject to the restrictions on Ages and Times as set out in Questions 6(c) and 6(d) of the Operating Plan.

Existing Floor Plan 1:100

Architectural Services and Design
 40 Polmont Park, Polmont
 Falkirk FK2 0XT
 email: arch.services.design@gmail.com

PROJECT
 Pepe's Bar
 12 Mar Place, Alloa
 FK10 2AB

DRAWING TITLE
 Layout Plans

CLIENT

SCALE 1:100 DATE February 2022
 DRG.NO. ASD 998 / 1.01 B