#### **Partnership and Performance**

Kilncraigs, Greenside Street, Alloa, FK10 1EB

Telephone: 01259 450000

#### THIS PAPER RELATES TO ITEMS 4 i - v ON THE AGENDA

### Memo

To: The Clerk to the Licensing Board

Clackmannanshire Council

**KIncraigs** 

Alloa

**FK10 1EB** 

From: **Paul Fair** 

**Licensing Standards Officer** 

Extension: 2091

Email: pfair@clacks.gov.uk

Our Ref: PF/LSO/NMV/REP/CO-OPs

Your Ref:

Date: **16 August, 2024** 

Subject: Licensing (Scotland) Act, 2005. Section 29

5 Applications - for a Non Minor Variation

Co-operative Group Food Limited - 5 Stores In Clackmannanshire

- 1. Having considered the content of the 5 applications listed in appendix B, I have the following comments to make, these comments should be treated as an individual representation made in identical terms in relation to each of the 5 applications, and in accordance with the terms of section 22 of the Licensing (Scotland) Act, 2005.
- 2. The applications to be determined seek to vary the premises licences No CC004, CC0041, CC0042, CC0069 and CC0105 in accordance with the submitted application forms.
- 3. The variation on each application seeks to include the home delivery of groceries including alcohol products in the list of additional activities at question 5(f).
- 4. Four of the applications seek to add "recorded background music" to a list of approved activities I have no concerns about this aspect of the applications that seek this addition.
- 5. The recently published statement of Licensing Policy 2023-2028 (the Policy) confirms at page 19 that the Board will require all premises seeking to make home deliveries of alcohol to have this specified on their operating plan.
- 6. The Policy goes on to indicate that home delivery of alcohol should be robustly managed and is likely to attract additional local conditions where the Licensing Board think it is necessary and expedient for the purposes of the licensing objectives.
- 7. In this case, I would suggest that to support compliance with the licensing objectives contained within the Licensing (Scotland) Act, 2005, that if the Board decide to grant the variation they should apply additional local conditions of the type suggested in the Policy.

- 8. At **Appendix A** I have drafted proposed conditions for the benefit of the Licensing Board that I believe will adequately address the common concerns that surround the home delivery of alcohol.
- 9. Those concerns are deliveries being made to underage persons, or to persons who are drunk or at serious risk of harm from drinking alcohol, and deliveries being made by untrained individuals, or by couriers that do not have robust age verification measures in place.
- 10. I have not had the opportunity to discuss the possibility of conditions of the nature suggested with the applicant's legal agent, however I am sure that they will have time to take instructions in relation to the proposals prior to the Board hearing.

#### Paul Fair

Licensing Standards Officer.

#### Appendix A

#### **Draft Local | Conditions Home Delivery Of Alcohol**

- 1. A written Age Verification Policy (AVP) must be kept and applied to all sales of alcohol for delivery to any place off the premises. This AVP must set out the steps that are to be taken to establish the age of a person attempting to take delivery of alcohol ("the customer") if it appears to the person making delivery of the alcohol that the customer appears to be less than 25 years of age (or such older age as may be specified in the policy).
- 2. Information must be provided to customers whether online or in store that Alcohol will only be left at the delivery address with a person who can prove that they are over 18 years of age.
- Premises Licence holders and Premises Managers must ensure that all persons involved in the delivery of alcohol from the premises have received appropriate training in the content and application of the Age Verification Policy to be applied to all deliveries.
- 4. A record of all persons trained in relation to the Age Verification Policy will be kept on the premises and made available to the Licensing Standards Officer and any Constable of Police Scotland.
- 5. A copy of the training record referred to in No 4 above should be supplied to delivery agent on completion of the training
- 6. Licence holders and Premises Managers will ensure that all persons involved in the delivery of alcohol from the premises have received appropriate training to ensure that deliveries of alcohol are not made to persons who are or appear to be drunk.
- 7. Licence holders using Royal Mail, a private postal service, a courier service or independent delivery drivers will ensure that an age verified signed for delivery option is utilised that requires any package containing alcohol to be left with an adult over 18 at the specified delivery address and at no other place.

- 8. The premises licence holder will ensure that records of all alcohol deliveries are retained on the premises and that those record contain the following information, the forename and surname of the purchaser, the delivery address, the quantity and type of alcohol delivered and the purchase price.
- 9. All records, electronic or written made in relation to the delivery of alcohol will be kept on the premises for at least 12 months and will be made available on demand to a Licensing Standards Officer for the area where the premises are located or to a Constable of Police Scotland.

Appendix B – List of applications referred to in this representation

Premises Licence No	Address	Type of Application	Nature of Variation
CC0004	Co-operative Group Food Limited 23/25 Main Street Clackmannan FK10 4JA	Non Minor Variation	To add Home delivery
CC0041	Co-operative Group Food Limited 70 Stirling Street Alva FK12 5ED	Non Minor Variation	To add Home delivery
CC0042	Co-operative Group Food Limited 26 Ochil Street Tullibody FK10 2PT	Non Minor Variation	To add Home delivery
CC0069	Co-operative Group Food Limited 44 Tullibody Road Alloa FK10 2LX	Non Minor Variation	To add Home delivery
CC0105	Co-operative Group Food Limited 74 High Street Tillicoultry FK13 6AB	Non Minor Variation	To add Home delivery



# **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.

Co-operative Group Food Limited 23/25 Main Street Clackmannan FK10 4JA

Licence Number: CC0004

#### **Question 2**

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



Co-operative Group Food Limited
1 Angel Square
Manchester
M60 0AG

#### **DETAILS OF VARIATION**

#### **Question 3**

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

On the Operating Plan, amend the box underneath Activities to read: "Recorded background music may be played within and outwith core hours."

On the Operating Plan, amend the box at Q5(f) to read: "The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005."

#### **OPERATING PLAN**

#### **Question 4**

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

#### YES/NO

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



#### LAYOUT PLAN

#### **Question 5**

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

**₩ES/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?

¥ÆS/NO

If Yes please give details of the proposed variation below

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



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



Personal Licence

Date of Issue	Name of Licensing Board Issuing	Reference No. Of Personal Licence		
Is the Variation Relati During the Application	ng to the change of Premises Ma n Period	nager to Take Effect		
		YES/NO		
If the Answer to the A Variation is to Take E	bove Question is NO Please Prov ffect.	ride Below the Date the		
DECLARATION BY	APPLICANT OR AGENT ON BEH	HALF OF APPLICANT		
If Signing on Behalf	of the Applicant Please State in	n What Capacity.		
The Contents of This Belief.	Application Are True to the Best of	of my Knowledge and		
Signature * (See Note Overleaf)		. Date		
Capacity		ARRIJGANT/AGENT (Delete as appropriate)		
Telephone Number a	nd Email Address of Signatory			
Audrey Junner, Hill Brown Licensing				
The Forsyth Building, 5 Renfield Street				
Glasgow G2 5EZ				



#### \* 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

Clackmannanshire Licensing Board has a duty to protect public funds that it administers and may use this information for the prevention and detection of fraud. For more details, please contact The Councils, Senior Auditor, on telephone number 01259 452047

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

#### **OPERATING PLAN**

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

#### **Question 1**

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

I(a) Will alcohol be sold for consumption solely ON the premises?	NO
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES
1(c) Will alcohol be sold for consumption both ON and OFF the premises?	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	N/A	N/A
Tuesday	N/A	N/A
Wednesday	N/A	N/A
Thursday	N/A	N/A
Friday	N/A	N/A
Saturday	N/A	N/A
Sunday	N/A	N/A

#### **Question 3**

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

Day	OFF Consumption	
	Opening time	Terminal hour

Monday	10:00am	10:00pm
Tuesday	10:00am	10:00pm
Wednesday	10:00am	10:00pm
Thursday	10:00am	10:00pm
Friday	10:00am	10:00pm
Saturday	10:00am	10:00pm
Sunday	10:00am	10:00pm

#### **Question 4**

#### SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	NO
*If YES – provide details	
N/A	

#### **Question 5**

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

COL. 1	COL. 2	COL. 3	COL. 4
5(a) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Accommodation	N	N/A	N/A
Conference facilities	N	N	N
Restaurant facilities	N	N	N
Bar meals	N	N	N
5(b) Activity  Social functions including:	Please confirm YES/NO	To be provided during core licensed hours – please confirm	Where activities are also to be provided outwith core licensed hours please confirm
D 1 - 1	N	YES/NO	YES/NO
Receptions including  Weddings, funerals, birthdays, retirements etc.	N	N	N
Club or other group meetings etc.	N	N	N
5(c) Activity Entertainment including:	Please confirm YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Recorded music – see 5(g)	Y	Y	Y
Live performances – see 5(g)	N	N	N
Dance facilities	N	N	N
Theatre	N	N	N

Films	N	N	N
Gaming	N	N	N
Indoor/outdoor sports	N	N	N
Televised sport	N	N	N
•			
5(d) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Outdoor drinking facilities	N	N	N
5(e) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm YES/NO
Adult entertainment	N	N	N

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

Recorded background music may be played within and outwith core hours.

#### 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.

The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005.

5(g) Late night premises opening after 1.00am

	e you have confirmed that you are providing live or recorded music, will the el level exceed 85dB?	
When	fully occupied, are there likely to be more customers standing than seated?	
*Dele	ete as appropriate	
Ques	tion 6 (On-sales only)	
CHIL	DREN AND YOUNG PERSONS	
6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	N/A
	*Delete as appropriate	
	11 1	
6(b)	Where the answer to 6(a) is YES provide statement of the <b>TERMS</b> under which they will be allowed entry	
N/A		

6(c)	Provide statement regarding the AGES of children or young persons to be allowed entry
N/A	
6(d)	Provide statement regarding the <b>TIMES</b> during which children and young persons will be allowed entry
N/A	
6(e)	Provide statement regarding the <b>PARTS</b> of the premises to which children and young persons will be allowed entry
Г	young persons will be unowed entry
N/A	

# **Question 7** CAPACITY OF PREMISES What is the proposed capacity of the premises to which this application relates? $Off\ Sales-18.03m2$ **Question 8** PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence) Personal details 8(a)Name No change 8(b) Date of birth Contact address 8(c) 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 * (see note below)
Audrey Junner, Hill Brown Licensing
The Forsyth Building, 5 Renfield Street
Glasgow G2 5EZ
Date15 <sup>th</sup> March 2024
CapacityAGENT
Telephone number and email address of signatory

#### \* 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.



# **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.

Co-operative Group Food Limited 70 Stirling Street Alva

FK12 5ED

Licence Number: CC0041

#### **Question 2**

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



Co-operative Group Food Limited
1 Angel Square
Manchester
M60 0AG

#### **DETAILS OF VARIATION**

#### **Question 3**

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

On the Operating Plan, amend the box at Q5(f) to read: "The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005."		

#### **OPERATING PLAN**

#### **Question 4**

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

#### YES/NO

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



#### LAYOUT PLAN

#### **Question 5**

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

₩ES/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

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



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



#### Personal Licence

		T	
Date of Issue	Name of Licensing Board Issuing	Reference No. Of Personal Licence	
Is the Variation Relati During the Application	ng to the change of Premises Mai	nager to Take Effect	
During the Application	TT CHOC	YES/NO	
If the Answer to the A Variation is to Take E	bove Question is NO Please Prov ffect.	ride Below the Date the	
DECLARATION BY	APPLICANT OR AGENT ON BEH	HALF 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 * (See Note Overleaf)		. Date	
Capacity		. ARRIXICANT/AGENT (Delete as appropriate)	
Telephone Number and Email Address of Signatory			
Audrey Junner, Hill Brown Licensing			
The Forsyth Building, 5 Renfield Street			
Glasgow G2 5EZ			



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

#### **OPERATING PLAN**

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

#### **Question 1**

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

I(a) Will alcohol be sold for consumption solely ON the premises?	NO
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES
1(c) Will alcohol be sold for consumption both ON and OFF the premises?	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	N/A	N/A	
Tuesday	N/A	N/A	
Wednesday	N/A	N/A	
Thursday	N/A	N/A	
Friday	N/A	N/A	
Saturday	N/A	N/A	
Sunday	N/A	N/A	

#### **Question 3**

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

Day	OFF Consumption	
	Opening time	Terminal hour

Monday	10:00am	10:00pm
Tuesday	10:00am	10:00pm
Wednesday	10:00am	10:00pm
Thursday	10:00am	10:00pm
Friday	10:00am	10:00pm
Saturday	10:00am	10:00pm
Sunday	10:00am	10:00pm

#### **Question 4**

#### SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	NO
*If YES – provide details	
N/A	
N/A	

#### **Question 5**

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

COL. 1	COL. 2	COL. 3	COL. 4	
5(a) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm YES/NO	
Accommodation	N	N/A	N/A	
Conference facilities	N	N	N	
Restaurant facilities	N	N	N	
Bar meals	N	N	N	
5(b) Activity  Social functions including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO	
Receptions including	N	N	N	
Weddings, funerals, birthdays, retirements etc.				
Club or other group meetings etc.	N	N	N	
5(c) Activity Entertainment including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO	
Recorded music – see 5(g)	Y	Y	Y	
Live performances – see 5(g)	N	N	N	
Dance facilities	N	N	N	
Theatre	N	N	N	

Films	N	N	N
Gaming	N	N	N
Indoor/outdoor sports	N	N	N
Televised sport	N	N	N
5(d) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Outdoor drinking facilities	N	N	N
5(e) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm YES/NO
Adult entertainment	N	N	N

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

The applicant has a PPL Licence No 00557344107 permitting the playing of recorded music during store opening hours.

#### 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.

The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005.

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?				
When	fully occupied, are there likely to be more customers standing than seated?			
*Dele	ete as appropriate			
Ques	tion 6 (On-sales only)			
CHIL	DREN AND YOUNG PERSONS			
6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	N/A		
	*Delete as appropriate			
6(b)	Where the answer to 6(a) is YES provide statement of the <b>TERMS</b> under which they will be allowed entry			
N/A				

6(c)	Provide statement regarding the AGES of children or young persons to be allowed entry
N/A	
6(d)	Provide statement regarding the <b>TIMES</b> during which children and young persons will be allowed entry
N/A	
6(e)	Provide statement regarding the <b>PARTS</b> of the premises to which children and young persons will be allowed entry
N/A	

## **Question 7** CAPACITY OF PREMISES What is the proposed capacity of the premises to which this application relates? Off Sales – 19.33 cubic metres **Question 8** PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence) Personal details 8(a)Name No change 8(b) Date of birth Contact address 8(c) 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.

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		TILD OP TIME	P	- 11 11 10 111				8	~	

Signature * (see note below)	
Audrey Junner, Hill Brown Licensing	
The Forsyth Building, 5 Renfield Street	
Glasgow G2 5EZ	
Date15 <sup>th</sup> March 2024	
CapacityAGENT	
Telephone number and email address of signatory	

#### \* Data Protection Act 1998

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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.

Co-op 26 Ochil Street Tullibody FK10 2PT

Licence Number: CC0042

#### **Question 2**

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



Co-operative Group Food Limited
1 Angel Square
Manchester
M60 0AG

#### **DETAILS OF VARIATION**

#### **Question 3**

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

On the Operating Plan, amend the box underneath Activities to read: "Recorded background music may be played within and outwith core hours."

On the Operating Plan, amend the box at Q5(f) to read: "The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005."

#### **OPERATING PLAN**

#### **Question 4**

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

#### YES/NO

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



#### LAYOUT PLAN

#### **Question 5**

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

₩ES/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?

¥ÆS/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 (Mandator Conditions).	у

#### **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



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



Personal Licence

Date of Issue	Name of Licensing Board Issuing	Reference No. Of Personal Licence
Is the Variation Polati	ng to the change of Promises Ma	pager to Take Effect
During the Application	ng to the change of Premises Ma n Period	YES/NO
		TES/NO
If the Answer to the A Variation is to Take E	bove Question is NO Please Proving from the state of the	ride Below the Date the
DECLARATION BY	APPLICANT OR AGENT ON BEH	HALF OF APPLICANT
If Signing on Behalf	of the Applicant Please State in	n What Capacity.
The Contents of This Belief.	Application Are True to the Best of	of my Knowledge and
Signature * (See Note Overleaf)		. Date 15th March 2024
Capacity		ARRINGANT/AGENT (Delete as appropriate)
Telephone Number a	nd Email Address of Signatory	
Audrey Junner, Hill Brown	Licensing	
The Forsyth Building, 5 Re	enfield Street	
Glasgow G2 5EZ		



#### \* 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	
Application signed/dated	
Original Licence enclosed or a Statement of reasons for failing to produce the Licence	
New Operating Plan Enclosed	
New Layout Plan Enclosed	

#### **OPERATING PLAN**

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

#### **Question 1**

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

I(a) Will alcohol be sold for consumption solely ON the premises?	NO
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES
1(c) Will alcohol be sold for consumption both ON and OFF the premises?	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	N/A	N/A	
Tuesday	N/A	N/A	
Wednesday	N/A	N/A	
Thursday	N/A	N/A	
Friday	N/A	N/A	
Saturday	N/A	N/A	
Sunday	N/A	N/A	

#### **Question 3**

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

Day	OFF Consumption		
	Opening time	Terminal hour	

Monday	10:00am	10:00pm
Tuesday	10:00am	10:00pm
Wednesday	10:00am	10:00pm
Thursday	10:00am	10:00pm
Friday	10:00am	10:00pm
Saturday	10:00am	10:00pm
Sunday	10:00am	10:00pm

#### **Question 4**

#### SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	NO
*If YES – provide details	
N/A	

#### **Question 5**

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

COL. 1	COL. 2	COL. 3	COL. 4
5(a) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Accommodation	N	N/A	N/A
Conference facilities	N	N	N
Restaurant facilities	N	N	N
Bar meals	N	N	N
5(b) Activity  Social functions including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Receptions including	N	N	N
Weddings, funerals, birthdays, retirements etc.			
Club or other group meetings etc.	N	N	N
5(c) Activity Entertainment including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Recorded music – see 5(g)	Y	Y	Y
Live performances – see 5(g)	N	N	N
Dance facilities	N	N	N
Theatre	N	N	N

Films	N	N	N
Gaming	N	N	N
Indoor/outdoor sports	N	N	N
Televised sport	N	N	N
•			
5(d) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Outdoor drinking facilities	N	N	N
5(e) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm YES/NO
Adult entertainment	N	N	N

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

Recorded background music may be played within and outwith core hours.

#### 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.

The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005.

	e you have confirmed that you are providing live or recorded music, will the el level exceed 85dB?	
When	fully occupied, are there likely to be more customers standing than seated?	
*Dele	ete as appropriate	
Ques	tion 6 (On-sales only)	
CHIL	DREN AND YOUNG PERSONS	
6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	N/A
	*Delete as appropriate	
	11 1	
6(b)	Where the answer to 6(a) is YES provide statement of the <b>TERMS</b> under which they will be allowed entry	
N/A		

6(c)	Provide statement regarding the AGES of children or young persons to be allowed entry
N/A	
6(d)	Provide statement regarding the <b>TIMES</b> during which children and young persons will be allowed entry
N/A	
6(e)	Provide statement regarding the <b>PARTS</b> of the premises to which children and young persons will be allowed entry
Г	young persons will be unowed entry
N/A	

# **Question 7** CAPACITY OF PREMISES What is the proposed capacity of the premises to which this application relates? Off Sales – 19.9525 cubic metres **Question 8** PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence) Personal details 8(a)Name No change 8(b) Date of birth Contact address 8(c)

8(e) Personal licence

Email address

8(d)

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.

ignature * (see note below)	
Audrey Junner, Hill Brown Licensing	
The Forsyth Building, 5 Renfield Street	
Glasgow G2 5EZ	
Pate15 <sup>th</sup> March 2024	
CapacityAGENT	
elephone number and email address of signatory	

#### \* 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.



# **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.

Co-operative Group Food Limited 44 Tullibody Road Alloa

FK10 2LX

Licence Number: CC0069

#### **Question 2**

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



Co-operative Group Food Limited
1 Angel Square
Manchester
M60 0AG

#### **DETAILS OF VARIATION**

#### **Question 3**

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

On the Operating Plan, amend the box underneath Activities to read: "Recorded background music may be played within and outwith core hours."

Please also amend the boxes adjacent to recorded music from 'NO NO NO' to 'YES YES YES'.

On the Operating Plan, amend the box at Q5(f) to read: "The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005."

#### **OPERATING PLAN**

#### **Question 4**

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

#### YES/NO

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



#### **LAYOUT PLAN**

#### **Question 5**

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

₩ES/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 (Mandate 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



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



#### 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			
z annig and r ipproduce.		YES/NO	
If the Answer to the A Variation is to Take E	bove Question is NO Please Provifect.	vide Below the Date the	
DECLARATION BY A	APPLICANT OR AGENT ON BEI	HALF OF APPLICANT	
f Signing on Behalf	of the Applicant Please State in	n What Capacity.	
The Contents of This Belief.	Application Are True to the Best of	of my Knowledge and	
Signature * (See Note Overleaf)		. Date	
Capacity		ARRLAGANT/AGENT (Delete as appropriate)	
Telephone Number a	nd Email Address of Signatory		
Audrey Junner, Hill Brown	Licensing		
The Forsyth Building, 5 Re	enfield Street		
Glasgow G2 5EZ			



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

#### **OPERATING PLAN**

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

#### **Question 1**

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

I(a) Will alcohol be sold for consumption solely ON the premises?	NO
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES
1(c) Will alcohol be sold for consumption both ON and OFF the premises?	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	N/A	N/A	
Tuesday	N/A	N/A	
Wednesday	N/A	N/A	
Thursday	N/A	N/A	
Friday	N/A	N/A	
Saturday	N/A	N/A	
Sunday	N/A	N/A	

#### **Question 3**

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

Day	OFF Consumption	
	Opening time	Terminal hour

Monday	10:00am	10:00pm
Tuesday	10:00am	10:00pm
Wednesday	10:00am	10:00pm
Thursday	10:00am	10:00pm
Friday	10:00am	10:00pm
Saturday	10:00am	10:00pm
Sunday	10:00am	10:00pm

#### **Question 4**

#### SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	NO
*If YES – provide details	
N/A	

#### **Question 5**

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

COL. 1	COL. 2	COL. 3	COL. 4
5(a) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Accommodation	N	N/A	N/A
Conference facilities	N	N	N
Restaurant facilities	N	N	N
Bar meals	N	N	N
5(b) Activity  Social functions including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Receptions including	N	N	N
Weddings, funerals, birthdays, retirements etc.			
Club or other group meetings etc.	N	N	N
5(c) Activity Entertainment including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Recorded music – see 5(g)	Y	Y	Y
Live performances – see 5(g)	N	N	N
Dance facilities	N	N	N
Theatre	N	N	N

Films	N	N	N
Gaming	N	N	N
Indoor/outdoor sports	N	N	N
Televised sport	N	N	N
5(d) Activity	Please confirm YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Outdoor drinking facilities	N	N	N
5(e) Activity	Please confirm YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Adult entertainment	N	N	N

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

Recorded background music may be played within and outwith core hours.

#### 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.

The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005.

5(g) Late night premises opening after 1.00am

	e you have confirmed that you are providing live or recorded music, will the el level exceed 85dB?	
When	fully occupied, are there likely to be more customers standing than seated?	
*Dele	ete as appropriate	
Ques	tion 6 (On-sales only)	
CHIL	DREN AND YOUNG PERSONS	
6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	N/A
	*Delete as appropriate	
6(b)	Where the answer to 6(a) is YES provide statement of the <b>TERMS</b> under which they will be allowed entry	
N/A		
IN/A		

6(c)	Provide statement regarding the AGES of children or young persons to be allowed entry
N/A	
6(d)	Provide statement regarding the <b>TIMES</b> during which children and young persons will be allowed entry
N/A	
6(e)	Provide statement regarding the <b>PARTS</b> of the premises to which children and young persons will be allowed entry
N/A	

# **Question 7** CAPACITY OF PREMISES What is the proposed capacity of the premises to which this application relates? $Off\ Sales-24.695m2$ **Question 8** PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence) Personal details 8(a)Name No change 8(b) Date of birth Contact address 8(c) 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	* (see note below)	
Audrey Junner, Hill H	Brown Licensing	
The Forsyth Building	, 5 Renfield Street	
Glasgow G2 5EZ		
Date15 <sup>th</sup> March 20	)24	
Capacity	AGENT	
Telephone number an	nd email address of signatory	

#### \* Data Protection Act 1998

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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.

Co-op 74 High Street Tillicoultry FK13 6AB

Licence Number: CC105

#### **Question 2**

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



Co-operative Group Food Limited 1 Angel Square Manchester M60 0AG

#### **DETAILS OF VARIATION**

#### **Question 3**

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

On the Operating Plan, amend the box underneath Activities to read: "Recorded background music may be played within and outwith core hours."

Please also amend the boxes adjacent to recorded music from 'NO NO NO' to 'YES YES YES'.

On the Operating Plan, amend the box at Q5(f) to read: "The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005."

#### **OPERATING PLAN**

#### **Question 4**

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

#### YES/NO

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



#### **LAYOUT PLAN**

#### **Question 5**

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

₩ES/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



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



Personal Licence

Date of Issue	Name of Licensing Board Issuing	Reference No. Of Personal Licence
	ng to the change of Premises Ma	nager to Take Effect
During the Applicatior	n Period	YES/NO
If the Answer to the A Variation is to Take E	bove Question is NO Please Prov ffect.	vide Below the Date the
DECLARATION BY	APPLICANT OR AGENT ON BEI	HALF OF APPLICANT
f Signing on Behalf	of the Applicant Please State in	n What Capacity.
The Contents of This Belief.	Application Are True to the Best of	of my Knowledge and
Signature. * (See Note Overleaf)		Date
Capacity		ARREGEANT/AGENT (Delete as appropriate)
Telephone Number a	nd Email Address of Signatory	
Audrey Junner, Hill Brown Licensing		
The Forsyth Building, 5 Renfield Street		
Glasgow G2 5EZ		



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

#### **OPERATING PLAN**

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

#### **Question 1**

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

I(a) Will alcohol be sold for consumption solely ON the premises?	NO
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES
1(c) Will alcohol be sold for consumption both ON and OFF the premises?	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	N/A	N/A	
Tuesday	N/A	N/A	
Wednesday	N/A	N/A	
Thursday	N/A	N/A	
Friday	N/A	N/A	
Saturday	N/A	N/A	
Sunday	N/A	N/A	

#### **Question 3**

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

Day	OFF Consumption	
	Opening time	Terminal hour

Monday	10:00am	10:00pm
Tuesday	10:00am	10:00pm
Wednesday	10:00am	10:00pm
Thursday	10:00am	10:00pm
Friday	10:00am	10:00pm
Saturday	10:00am	10:00pm
Sunday	10:00am	10:00pm

#### **Question 4**

#### SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	NO
*If YES – provide details	
N/A	

#### **Question 5**

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

COL. 1	COL. 2	COL. 3	COL. 4
5(a) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm YES/NO
Accommodation	N	N/A	N/A
Conference facilities	N	N	N
Restaurant facilities	N	N	N
Bar meals	N	N	N
5(b) Activity  Social functions including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Receptions including	N	N	N
Weddings, funerals, birthdays, retirements etc.			
Club or other group meetings etc.	N	N	N
5(c) Activity Entertainment including:	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Recorded music – see 5(g)	Y	Y	Y
Live performances – see 5(g)	N	N	N
Dance facilities	N	N	N
Theatre	N	N	N

Films	N	N	N
Gaming	N	N	N
Indoor/outdoor sports	N	N	N
Televised sport	N	N	N
,			
5(d) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Outdoor drinking facilities	N	N	N
5(e) Activity	Please confirm  YES/NO	To be provided during core licensed hours – please confirm  YES/NO	Where activities are also to be provided outwith core licensed hours please confirm  YES/NO
Adult entertainment	N	N	N

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

Recorded background music may be played within and outwith core hours.

#### 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.

The sale of food, non-food items and other household goods, and the provision of ancillary consumer services within and outwith licensed hours. Home deliveries may be provided to customers. Alcohol will only be delivered in terms of and in compliance with the relevant provisions of the Licensing (Scotland) Act 2005.

	e you have confirmed that you are providing live or recorded music, will the el level exceed 85dB?	
When	fully occupied, are there likely to be more customers standing than seated?	
*Dele	ete as appropriate	
Ques	tion 6 (On-sales only)	
CHIL	DREN AND YOUNG PERSONS	
6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	N/A
	*Delete as appropriate	
6(b)	Where the answer to 6(a) is YES provide statement of the <b>TERMS</b> under which they will be allowed entry	
N/A		

6(c)	Provide statement regarding the AGES of children or young persons to be allowed entry
N/A	
6(d)	Provide statement regarding the <b>TIMES</b> during which children and young persons will be allowed entry
N/A	
6(e)	Provide statement regarding the <b>PARTS</b> of the premises to which children and young persons will be allowed entry
N/A	

# **Question 7** CAPACITY OF PREMISES What is the proposed capacity of the premises to which this application relates? $Off\ Sales-29.746m2$ **Question 8** PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence) Personal details 8(a)Name No change 8(b) Date of birth Contact address 8(c) 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	* (see note below)	
Audrey Junner, Hill Brown	n Licensing	
The Forsyth Building, 5 Re	enfield Street	
Glasgow G2 5EZ		
Date15 <sup>th</sup> March 2024		
Capacity	.AGENT	
Telephone number and ema	nail address of signatory	

#### \* Data Protection Act 1998

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