

SCOTTISH BORDERS COUNCIL



-5 MAR 2018

LICENSING UNIT

SCOTTISH BORDERS LICENSING BOARD

Licensing (Scotland) Act 2005, Section 29 APPLICATION FOR VARIATION OF PREMISES LICENCE

If you are completing this form by hand, please write legibly in block capitals using ink

Question 1

Please provide the name, address, postcode, date and place of birth, and contact telephone number of the current Licensee.

Laura BRYCE, I	

Question 2

Please provide full name, address, postcode and *licence number of the premises (*if known)

The Contented Sole, 3/4 Old Quay, Eyemouth, TD14 5HS

SB/PREM/7

Question 3

Do you propose to vary any of the information contained in the operating plan contained in the licence application?

YES

Where the proposed variation affects the current operating plan, please submit an operating plan including the proposed variations.

(if YES, please give details of the proposed variation below) (continue on a separate sheet if necessary)

Change Core Hours to commence 11 a.m. seven days, currently 11 a.m. Monday to Saturday and 12.30 p.m. Sunday. Change terminal hour on Thursday to 1 am, currently 12 midnight.

Include Seasonal Variation – Festive season dates open until 1 a.m.

Change to Yes in Column 4 of listed activities i.e. Activities outwith core hours with appropriate explanation included .

Change the terms of Children and Young Persons access to include Access for pre arranged private functions and when dining allow access until 10 p.m.

Question 4 Do you propose a variation to the layout plan contained in the licence? NO
Where the proposed variation affects the current layout plan, please submit 5 sets of plans showing the proposed new layout of the premises. (if YES, please give details of the proposed variation below) (continue on a separate sheet if necessary)
Question 5 Do you propose to vary any other information contained or referred to in the licence, including an addition, deletion or other modification? NO
(if YES, please give details of the proposed variation below) (continue on a separate sheet if necessary)
VARIATION TO SUBSTITUTE NEW PREMISES MANAGER
Question 6
Please provide details below of the name, address and personal licence number of the <u>EXISTING</u> Premises Manager.
Proposed Promises Manager
Proposed Premises Manager Name and telephone number

Date and place of birth	
Contact address, including postcode	
Email address	
Personal licence	
Date of issue Name of Licensing Board issuing	Reference number of personal licence
Is the variation in respect of Question 6 to take effect during the	application period? YES/NO*
If the answer to the above question is NO, please provide below	the data from which the variation is to
take effect.	the date from which the variation is to
DECLARATION BY APPLICANT OR AGENT ON BEHALI	E OE ADDI ICANT
If signing on behalf of the applicant please state in wha	
The contents of this Application are true to the best of my ki	nowledge and belief.
Signature * (see note below)	
Date 26.02.18	
^	
Capacity APPLICANT APPLICANT/AGENT (delete as appropriate)
Tolophone number and amoil address of signature	
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.

I have enclosed the relevant documents with this application – please tick the relevant boxes		
Premises Licence		
Operating Plan**		
Layout plans**		
Planning certificate	3.0000000000000000000000000000000000000	
Building standards certificate		
Food hygiene certificate		

^{**} Where the proposed variation affects the current layout plan, please submit 7 sets of plans showing the proposed new layout of the premises. Where the proposed variation affects the current operating plan, please submit an operating plan including the proposed variations.

Variations involving structural alterations should submit the relevant Section 50 certificates with their application.

For use by the Licensing Board only Application checklist		
Date received	Documents	
Fee amount	Premises Licence	
Receipt number	Operating Plan	
Received by (INITIALS)	Layout Plans	
Consideration date	Planning Certificate	
Last date for consideration	Building Standard Certificate	
Date of initial hearing	Food Hygiene Certificate	
Date of any modification hearing		
Date granted/refused (delete as appropriate)		