

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>1(a) Will alcohol be sold for consumption solely ON the premises?</i>	<i>NO</i>
<i>1(b) Will alcohol be sold for consumption solely OFF the premises?</i>	<i>NO</i>
<i>1(c) Will alcohol be sold for consumption both ON and OFF the premises?</i>	<i>YES</i>
<i>*Delete as appropriate</i>	

Question 2

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

<i>Day</i>	<i>ON Consumption</i>	
	<i>Opening time</i>	<i>Terminal hour</i>
<i>Monday</i>	11.00am	12 Midnight
<i>Tuesday</i>	11.00am	12 Midnight
<i>Wednesday</i>	11.00am	12 Midnight
<i>Thursday</i>	11.00am	12 Midnight
<i>Friday</i>	11.00am	12 Midnight
<i>Saturday</i>	11.00am	1am
<i>Sunday</i>	11.00am	12 Midnight

Question 3

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

<i>Day</i>	<i>OFF Consumption</i>	
	<i>Opening time</i>	<i>Terminal hour</i>
<i>Monday</i>	11.00am	10.00pm
<i>Tuesday</i>	11.00am	10.00pm
<i>Wednesday</i>	11.00am	10.00pm
<i>Thursday</i>	11.00am	10.00pm
<i>Friday</i>	11.00am	10.00pm
<i>Saturday</i>	11.00am	10.00pm
<i>Sunday</i>	11.00am	10.00pm

Question 4

SEASONAL VARIATIONS

<i>Does the applicant intend to operate according to seasonal demand</i>	YES
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**If YES – provide details*

The Premises will operate on more restricted hours according to seasonal demand and any hours set out in the Licensing Board's Festive Policy

Question 5

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

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

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

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

These activities may commence prior to core hours but would not extend beyond without the benefit of an occasional extension. No sale of alcohol will occur 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.

These premises are located within a holiday home park where holiday accommodation is provided. Other activities will include a range of entertainment along with fitness type classes.

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*
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When fully occupied, are there likely to be more customers standing than seated?	YES/NO*
*Delete as appropriate	

Question 6 (On-sales only)

CHILDREN AND YOUNG PERSONS

6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	YES
	*Delete as appropriate	

6(b) Where the answer to 6(a) is YES provide statement of the **TERMS** under which they will be allowed entry

Children (0-15) and Young Persons (16-17) to be accompanied at all times unless they are within the games room. They are permitted to pass straight through the premises to reach the games room unaccompanied.

6(c) Provide statement regarding the **AGES** of children or young persons to be allowed entry

Children 0 to 15 years
Young Persons 16 and 17 years

6(d) Provide statement regarding the **TIMES** during which children and young persons will be allowed entry

Children and Young Persons are permitted until the terminal hour.

6(e) Provide statement regarding the **PARTS** of the premises to which children and young persons will be allowed entry

All public parts.

Question 7

CAPACITY OF PREMISES

What is the proposed capacity of the premises to which this application relates?

200

Question 8

PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence)

Personal details

8(a) Name

Stephen Kevin Tokelove

8(b) Date of birth

[REDACTED]

8(c) Contact address

[REDACTED]

8(d) *Email address*

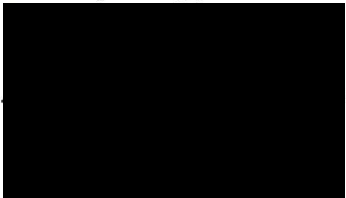
8(e) *Personal licence*

<i>Date of issue</i>	<i>Name of Licensing Board issuing</i>	<i>Reference no. of personal licence</i>
28.06.16	Aberdeenshire	AB-N-PER1258

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)

Date

Capacity APPLICANT/AGENT (delete as appropriate).

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.