



## SCOTTISH BORDERS LICENSING BOARD

## OPERATING PLAN

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

**Question 1**

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

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

**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	1.00 am
Friday	11.00am	1.00 am
Saturday	11.00am	1.00 am
Sunday	11.00am	12 midnight

### **Question 3**

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

<b>Day</b>	<b>OFF Consumption</b>	
	<b>Opening time</b>	<b>Terminal hour</b>
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
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\*If YES – provide details

Christmas Eve, Christmas Day, Boxing Day, New Years Eve and New Years Day open until 1 a.m. or within any other Licensing Board Policy.

### **Question 5**

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

<b>COL. 1</b> <b>(a) Activity</b>	<b>COL. 2</b> <b>Please confirm</b> <b>YES/NO</b>	<b>COL. 3</b> <b>To be provided during</b> <b>core licensed hours –</b> <b>please confirm YES/NO</b>	<b>COL. 4</b> <b>Where activities are also to</b> <b>be provided outwith core</b> <b>licensed hours please</b> <b>confirm YES/NO</b>
Accommodation	YES	N/A	N/A
Conference facilities	YES	YES	YES
Restaurant facilities	YES	YES	YES
Bar meals	YES	YES	YES
<b>(b) Activity</b> <b>Social functions</b> <b>including:</b>	<b>Please confirm</b> <b>YES/NO</b>	<b>To be provided during</b> <b>core licensed hours –</b> <b>please confirm YES/NO</b>	<b>Where activities are also to</b> <b>be provided outwith core</b> <b>licensed hours please</b> <b>confirm YES/NO</b>
Receptions including weddings, funerals, birthdays, retirements etc.	YES	YES	YES
Club or other group meetings etc.	YES	YES	YES

<b>(c) Activity</b> <b>Entertainment including:</b>	<b>Please confirm</b> <b>YES/NO</b>	<b>To be provided during</b> <b>core licensed hours –</b> <b>please confirm YES/NO</b>	<b>Where activities are also to</b> <b>be provided outwith core</b> <b>licensed hours please</b> <b>confirm YES/NO</b>
<i>Recorded music –see 5(g)</i>	YES	YES	YES
<i>Live performance – see 5(g)</i>	YES	YES	NO
<i>Dance facilities</i>	YES	YES	YES
<i>Theatre</i>	YES	YES	NO
<i>Films</i>	YES	YES	NO
<i>Gaming</i>	YES	YES	NO
<i>Indoor/outdoor sports</i>	YES	YES	NO
<i>Televised sport</i>	YES	YES	YES
<b>(d) Activity</b>	<b>Please confirm</b> <b>YES/NO</b>	<b>To be provided during</b> <b>core licensed hours –</b> <b>please confirm</b> <b>YES/NO</b>	<b>Where activities are also to</b> <b>be provided outwith core</b> <b>licensed hours please</b> <b>confirm YES/NO</b>
<i>Outdoor drinking facilities</i>	NO	NO	NO
<b>(e) Activity</b>	<b>Please confirm</b> <b>YES/NO</b>	<b>To be provided during</b> <b>core licensed hours –</b> <b>please confirm</b> <b>YES/NO</b>	<b>Where activities are also to</b> <b>be provided outwith core</b> <b>licensed hours please</b> <b>confirm YES/NO</b>
<i>Adult entertainment</i>	NO	NO	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 other than for residents.

(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.

Any other activities normally associated with a fully licensed hotel. The Hotel includes full Spa facilities which are open to both Resident and Non resident customers.

(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?	NO
When fully occupied, are there likely to be more customers standing than seated?	NO

### **Question 6 (On-sales only)**

#### *CHILDREN AND YOUNG PERSONS*

(a)	<i>When alcohol is being sold for consumption on the premises will children or young persons be allowed entry</i>	YES
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(b) *Where the answer to 6(a) is YES provide statement of the **TERMS** under which they will be allowed entry*

Children and Young Persons as residents. Non resident children and Young Persons when accompanied by an appropriate adult.

(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

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

As residents allowed access at any time. Non resident children and Young Persons during Core Hours.

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

All public and residential areas.

### **Question 7**

#### *CAPACITY OF PREMISES*

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

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### **Question 8**

#### *PREMISES MANAGER*

*Personal details*

(a) *Name*

Elliott Winyard

(b) Date of birth

[REDACTED]

(c) Contact address

[REDACTED]

(d) Telephone number and e-mail address

[REDACTED]

(e) Personal licence

Date of issue	Name of Licensing Board issuing	Ref number of personal licence
18/05/2015	Scottish Borders Licensing Board	SB/LIQ/12227

**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 ..... [REDACTED] ..... \* (see note below)

Date ..... 12 / 12 / 2017 .....

Capacity ..... APPLICANT/~~AGENT~~ (delete as appropriate).

Telephone number and email address of signatory .

[REDACTED]

\* **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.