



## SCOTTISH BORDERS LICENSING BOARD

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

Regulatory Services  
 21 MAY 2019  
 Legal & Licensing

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

**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	YES
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\*If YES – provide details

The operating days and hours will vary according to seasonal demand.

Christmas Eve, Christmas Day, Boxing Day, New Years DAY AND New Years Eve open until 1.00 am or within any other board 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 (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
Accommodation	NO	N/A	N/A
Conference facilities	YES	YES	Yes
Restaurant facilities	YES	YES	Yes
Bar meals	NO	NO	No
(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 weddings, funerals, birthdays, retirements etc.	Yes	Yes	Yes
Club or other group meetings etc.	YES	YES	Yes

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

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

The premises may operate prior to core hours but not extend beyond without the benefit of an extended hours licence. No alcohol will be sold outwith core hours.

**(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 premises operate as a visitor centre with café/restaurant, gift shop and includes a small theatre.

**(g) Late night premises opening after 1.00am**

<b>Where you have confirmed that you are providing live or recorded music, will the decibel level exceed 85dB?</b>	<b>NO</b>
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<b>When fully occupied, are there likely to be more customers standing than seated?</b>	<b>NO</b>
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**Question 6 (On-sales only)**

**CHILDREN AND YOUNG PERSONS**

<b>(a)</b>	<b><i>When alcohol is being sold for consumption on the premises will children or young persons be allowed entry</i></b>	<b>YES</b>
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<b>(b)</b>	<b><i>Where the answer to 6(a) is YES provide statement of the TERMS under which they will be allowed entry</i></b>
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Children accompanied by an adult for the purpose of using the café restaurant facilities or when attending the theatre.

Young Persons for the same purpose but without the requirement of being accompanied

<b>(c)</b>	<b><i>Provide statement regarding the AGES of children or young persons to be allowed entry</i></b>
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Children – 0 to 15 years

Young Persons – 16 and 17 years.

<b>(d)</b>	<b><i>Provide statement regarding the TIMES during which children and young persons will be allowed entry</i></b>
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For the duration of the purpose of the visit.

<b>(e)</b>	<b><i>Provide statement regarding the PARTS of the premises to which children and young persons will be allowed entry</i></b>
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All public areas

**Question 7**

**CAPACITY OF PREMISES**

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

Tearoom - 70

Theatre Foyer - 72

**Question 8**

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

**Personal details**

**(a)**     **Name**

Rory Powell

(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
18.04.2019	Scottish Borders Licensing Board	SB/LIQ/12752

**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.