

19/03025/sec29



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.

Hawick Rugby Limited,
Mansfield Park,
Mansfield Road,
Hawick,
TD9 8AW

01450 374291

Question 2

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

Hawick RFC Clubrooms

Mansfield Park
Mansfield Road,
Hawick
TD9 8AW

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 (On Sales) to 11 a.m. to 12 midnight Sunday to Wednesday and 11 a.m. to 1.00 a.m. Thursday (Currently 12.30 p.m. to 11 p.m. Sunday, 11 a.m. to 11 p.m. Monday to Thursday. Change Core Hours (Off Sales to 11 a.m. to 10 p.m. Sundays. (Currently 12.30 p.m. to 11 p.m.

At Question 5 (Listed Activities) Change No to Yes in Column 4 for Restaurant Facilities, Bar Meals, Club or other Group Meetings, Recorded Music, Live Performance, Dance Facilities, Theatre, Films, Indoor and outdoor sports and

Televised Sport.

Change the explanation at question 5(f) as to other activities.

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 EXISTING Premises Manager.

Proposed Premises Manager

Name and telephone number

[Redacted]

Date and place of birth

[Redacted]

Contact address, including postcode

[Redacted]

Email address

[Redacted]

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 date from which the variation is to take effect.

[Redacted]

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 Application are true to the best of my knowledge and belief.

Signature [Redacted] (see note below)

Date 25.9.19

Capacity CLUBHOUSE MANAGER APPLICANT/AGENT (delete as appropriate) STUART KINGHORN TREASURER

Telephone number and email address of signatory [Redacted]

* Data Protection Act 1998