

SCOTTISH BORDERS LICENSING BOARD

APPLICATION FOR PROVISIONAL PREMISES LICENCE*

*Delete as appropriate

Licensing (Scotland) Act 2005, section 20

APPLICANT INFORMATION Licensing (Scotland) Act 2005, section 20(1)

Question 1

The Office

Name, address and postcode of premises to be licensed.

Mosspaul Inn
Teviothead
Hawick
TD9 0LP
Question 2
Particulars of applicant
 (a) Where applicant is an individual, provide full name, date and place of birth, and home address including postcode.
N/A
(b) Where applicant is a partnership, please provide full name, and postal address of partnership.
N/A
c) Where applicant is a company, please provide name, registered office and company registration number.

Mosspaul Holdings Ltd, Mosspaul Inn, Teviothead, Hawick, TD9 0LP
Co. Reg. No. 635515
(d) Where the applicant is a club or other body, please provide full name, and postal address of club or other body.
N/A
(e) Where applicant is a partnership, company, club or other body, please provide the names, dates and places of birth, and home addresses of connected persons.*
Alison Jean Barker,
Edward Paul Barker,
* Connected person is defined in section 147(3) of the Licensing (Scotland) Act 2005.
Question 3
Previous applications
Has the applicant been refused a premises licence under section 23 of the Licensing (Scotland) Act 2005 in respect of the same premises? NO
If YES – provide full details
Question 4
Previous convictions
Has the applicant or any connected person ever been convicted of a relevant or foreign offence ()
*If YES – provide full details

For the purpose of this Act, a conviction for a relevant offence or foreign offence is to be disregarded if it is spent for the purpose of the Rehabilitation of Offenders Act 1974

N. C.	
Name & position Date of conviction or Court Offence Pen	alty
(if applicable) sentence	
	150 March 120 Ma

		The state of the s		
		Project Windows (Inc.)		
DESCRIPTION OF	PREMISES Licensing (Sco	otland) Act 20	005, section 20	(2)(a)
Question 5				
Description of pren question 6)	nises (where application is	submitted by	a members' cli	ub, please also complete
The Office is a sing	gle room situated on the gro	ound floor wit	hin the Mosspa	aul Inn.
Question 6				
To be completed by	y members' clubs only			
	stitution and rules conform Licensing (Clubs) (Scotland			YES/NO*
*delete as appropriate	e			
DECLARATION BY	Y APPLICANT OR AGENT	ON BEHALF	OF APPLICA	<u>NT</u>
lf signing <u>on beha</u>	lf of the applicant please	state in wha	t capacity.	
The conte	ne	best of my kr	nowledge and b	pelief.
Signature			• • • • • • • • • • • • • • • • • • • •	* (see note below)
Date	•		***************************************	
Capacity	PLICAUT	APPI	.ICANT/AGENT	Γ (delete as appropriate)
Telephone number	and email address of signa	tory	• • • • • • • • • • • • • • • • • • • •	
I have enclosed the	e relevant documents with th	nis application	ı – please tick t	he relevant boxes
Operating plan				
Layout plan				
Planning certificate				**************************************
Building standards	certificate			
Enod hydiene certi	ificate	66 (60 0) 60 (60 0) (7		

* 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.