



## 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.*

Punch Partnership Limited  
Jubilee House  
Second Avenue  
Burton on Trent, DE14 2WF

#### Question 2

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

Besom Inn  
75-77 High Street  
Coldstream  
Berwickshire, TD12 4AE  
Licence Number SB/PREM/45

#### Question 3

*Do you propose to vary any of the information contained in the operating plan contained in the licence application?*

YES / NO\*

**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)*

At Qu 2 amend Sunday opening hours from 12.30pm to 11.00am for on sales  
At Qu 3 amend Sunday opening hours from 12.30pm to 11.00am for off sales  
At Qu 5 allow (a) bar meals (b) receptions; club meetings; (c) recorded music; live performance; dance; gaming; indoor/outdoor sport and tv sport outwith core hrs  
(g) amend outside drinking from No to Yes in all four columns  
Delete further info and add follow - activities for breakfast may commence before core hours but not before 8am and column 4 activities will be ancillary  
At Qu 6 (e) amend to include the outside areas for children and young persons access

CARRY OUT FOOD FACILITY WILL ALSO BE AVAILABLE.

**Question 4**

Do you propose a variation to the layout plan contained in the licence? YES / ~~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)*

Addition of the outside drinking areas for the premises

**Question 5**

Do you propose to vary any other information contained or referred to in the licence, including an addition, deletion or other modification? ~~YES~~ / 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

Date and place of birth

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Contact address, including postcode

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Email address

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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.

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**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 March 2020 .....

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

Telephone number and email address of signatory

Tel: 0333 006 1405 Email: Caroline.loudon@TLTsolicitors.com

**\* 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.