

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

^{*}delete as appropriate

Question 2

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

| Day | ON Consumption | | | |
|-----------|----------------|---------------|--|--|
| | Opening time | Terminal hour | | |
| Monday | N/A | N/A | | |
| Tuesday | N/A | N/A | | |
| Wednesday | N/A | N/A | | |
| Thursday | N/A | N/A | | |
| Friday | N/A | N/A | | |
| Saturday | N/A | N/A | | |
| Sunday | N/A | N/A | | |

Question 3

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

| Day | OFF Consumption | | |
|--------|-----------------|---------------|--|
| | Opening time | Terminal hour | |
| Monday | 10 a.m. | 10 p.m. | |

| Tuesday | 10 a.m. | 10 p.m. |
|-----------|---------|---------|
| Wednesday | 10 a.m. | 10 p.m. |
| Thursday | 10 a.m. | 10 p.m. |
| Friday | 10 a.m. | 10 p.m. |
| Saturday | 10 a.m. | 10 p.m. |
| Sunday | 10 a.m. | 10 p.m. |

Question 4

| oes the applicant intend to operate according to seasonal demand | NO |
|------------------------------------------------------------------|----|
| f YES – provide details | |
| | |
| | |
| | |

Question 5

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

| COL. 1 | COL. 2 | COL. 3 | COL. 4 |
|----------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| (a) Activity | 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 |
| Accommodation | N/A | | |
| Conference facilities | NO | 4 | |
| Restaurant facilities | NO | | AL. 04000 |
| Bar meals | NO | | |
| (b) Activity Social functions including: | Please confirm YES/NO | To be provided during core licensed hours – please confirm | Where activities are also to be provided outwith core licensed hours please confirm |
| | | | YES/NO |
| Receptions including weddings, funerals, birthdays, retirements etc. | NO | | YES/NO |

| (c) Activity Entertainment 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 |
|----------------------------------------|-----------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Recorded music -see 5(g) | YES | YES | YES |
| Live performance - see 5(g) | NO | | |
| Dance facilities | NO | | |
| Theatre | NO | | |
| Films | NO | | |
| Gaming | NO | | |
| Indoor/outdoor sports | NO | | |
| Televised sport | NO | | |
| (d) Activity | 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 |
| Outdoor drinking facilities | NO | | |
| (e) Activity | 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 |
| Adult entertainment | NO | 1 | |

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

The premises operate as clothing and a gift shop selling a range of products and produce which in the main will be of Scottishl origin and will include a range of Ales, Wines and Spirits. Recorded music may be played any time the premises are open.

(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.

| (a) | I ate | night | premises | opening | after | 1 00am |
|-----|-------|--------------|------------|----------|-------|----------|
| (1) | | I III III II | DI CHINOCO | UUGIIIIU | ance | I.VValli |

Where you have confirmed that you are providing live or recorded music, will the decibel level exceed 85dB?



When fully occupied, are there likely to be more customers standing than seated?



Question 6 (On-sales only)

| CHILDREN AND YOUNG PERSONS |
|---------------------------------------------------------------------------------------------------------------------|
| (a) When alcohol is being sold for consumption on the premises will children or young persons be allowed entry |
| *delete as appropriate |
| (b) Where the answer to 6(a) is YES provide statement of the TERMS under which they will be allowed entry |
| |
| (c) Provide statement regarding the AGES of children or young persons to be allowed entry |
| (d) Provide statement regarding the TIMES during which children and young persons will be allowed entry |
| |
| (e) Provide statement regarding the PARTS of the premises to which children and young persons will be allowed entry |
| • |
| Question 7 CAPACITY OF PREMISES What is the proposed capacity of the premises to which this application relates? |
| SEE LAYOUT PLANS. |
| Question 8 |
| PREMISES MANAGER (NOTE: not required where application is for grant of provisional premises licence) |
| Personal details |
| (a) Name |
| Catryna Reid |
| (b) Date of birth |

| (c) | Contact address | |
|-----|-------------------------------------|--|
| | | |
| (d) | Telephone number and e-mail address | |
| | | |
| | • • | |
| | | |
| | | |

(e) Personal licence

| Name of Licensing Board issuing | Reference no. of personal licence |
|----------------------------------|-----------------------------------|
| Scottish Borders Licensing Board | |
| | |

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 on | حمام ممناهمهم | | a tha haat. | برمضا بحماكم | vledge and bel | :-4 |
|--------------|------------|---------------|--------------|-------------|--------------|----------------|------|
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| Signature | * (see note below) |
|-------------------------------------------------|--------------------|
| | 22-6-2020 |
| 52 | |
| Capacity | |
| 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.