

**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?	<b>NO</b>
(b) Will alcohol be sold for consumption solely OFF the premises?	<b>YES</b>
(c) Will alcohol be sold for consumption both ON and OFF the premises?	<b>NO</b>

*\*delete as appropriate*

**Question 2**

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

<b>Day</b>	<b>ON Consumption</b>	
	<b>Opening time</b>	<b>Terminal hour</b>
<b>Monday</b>	<b>N/A</b>	<b>N/A</b>
<b>Tuesday</b>	<b>N/A</b>	<b>N/A</b>
<b>Wednesday</b>	<b>N/A</b>	<b>N/A</b>
<b>Thursday</b>	<b>N/A</b>	<b>N/A</b>
<b>Friday</b>	<b>N/A</b>	<b>N/A</b>
<b>Saturday</b>	<b>N/A</b>	<b>N/A</b>
<b>Sunday</b>	<b>N/A</b>	<b>N/A</b>

**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****SEASONAL VARIATIONS**

Does the applicant intend to operate according to seasonal demand	NO
---	----

\*If 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 (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		
Conference facilities	NO		
Restaurant facilities	NO		
Bar meals	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,	NO		

birthdays, retirements etc.			
Club or other group meetings etc.	NO		
<b>(c) Activity Entertainment including:</b>	<b>Please confirm 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>
Recorded music –see 5(g)	NO		
Live performance – see 5(g)	NO		
Dance facilities	NO		
Theatre	NO		
Films	NO		
Gaming	NO		
Indoor/outdoor sports	NO		
Televised sport	NO		
<b>(d) Activity</b>	<b>Please confirm 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>
Outdoor drinking facilities	NO		
<b>(e) Activity</b>	<b>Please confirm 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>
Adult entertainment	NO		

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

(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 are a Butchers shop and predominantly offer meat and meat products along with other grocery items for sale by retail.

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

Where you have confirmed that you are providing live or recorded music, will the decibel level exceed 85dB?	YES/NO*
---	---------

When fully occupied, are there likely to be more customers standing than seated?	YES/NO*
--	---------

\*delete as appropriate

**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	YES/NO*
--	---------

\*delete as appropriate

(b) Where the answer to 6(a) is YES provide statement of the <b>TERMS</b> under which they will be allowed entry
--

--

(c) Provide statement regarding the <b>AGES</b> of children or young persons to be allowed entry
--

--

(d) Provide statement regarding the <b>TIMES</b> during which children and young persons will be allowed entry
--

--

(e) Provide statement regarding the <b>PARTS</b> 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?*

7.25 Sq. M.

**Question 8**

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

*Personal details*

(a) *Name*

Dean Mark

(b) *Date of birth*

[REDACTED]

(c) *Contact address*

[REDACTED]

(d) *Telephone number and e-mail address*

[REDACTED]

(e) *Personal licence*

<b>Date of issue</b>	<b>Name of Licensing Board issuing</b>	<b>Reference no. of personal licence</b>
11.12.2019	Scottish Borders Licensing Board	SB/LIQ/12875

**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 .....12/11/2020.....

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.