



## 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.

Angus O'Malley's Sports Bar Limited

10 The Valley

Selkirk

**TD7 4DQ** 

Per. Timothy Brown



#### Question 2

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

Angus O'Malley's

10 The Valley

Selkirk

TD7 4DQ

SB/PREM/228

### 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.

(Currently 12 Change the to Change NO to Restaurant for Club Meeting sports and To Include an ex Change the to	.30 p.m.) erms of the seas o YES in column ecilities and film es, Recorded Mu elevised Sport. cplanation as to erms of Childre	sonal variation is two three a s. Change NO sic, Live Perfo Yes in columi	nd four at listed ac I to YES in column ormance, Dance Fa	etivities fo four for acilities, l	or Bar Meals, Receptions, Indoor outdoo
purpose of d  Question 4					
Where the pr of plans show	oposed variation	n affects the c	contained in the lice current layout plan, of the premises. elow) (continue on a sep	, please s	
		= ==	,		
			contained or referre		NO
(if YES, please g	ive details of the pro	oosed variation be	elow) (continue on a se	arate sheel	t if necessary)
	O SUBSTITUTE	NEW PREMIS	ES MANAGER		
VARIATION T	OSOBSIIIOIL				
<b>Question 6</b> Please provide	details below of the	e name, address	and personal licence	number o	f the <u>EXISTING</u>
Question 6	details below of the	e name, address		number o	

Proposed Prea	<i>mises Manager</i> hone number		
Traine and tologi			
Date and place of	of birth	- a	01:0.5
		70.000	
Contact address	s, including postcode		
		2	
Email address		58000	
Personal licence		-	
Date of issue	Name of Licensing Board issuing	Reference number of pe	ersonal licence
Is the variation in	n respect of Question 6 to take effect during t	he application period?	YES/NO*
If the answer to take effect.	the above question is NO, please provide bel	ow the date from which the	variation is to
take ellect.			
	N BY APPLICANT OR AGENT ON BEH		
If signing on b	pehalf of the applicant please state in v	vhat capacity.	
The contents o	f this Application are true to the best of m	·	
Signature ,.	* (see note below)		
Date 4/12/2	.0 -		
Canacity PREM	ISES MANAGER APPLICANTA	T (delete as annronrista)	
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Telephone numb	per and email address of signatory		
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