

## OPERATING PLAN

Licensing (Scotland) Act 2005, section 20(2)(b)(i)

### Question 1

STATEMENT REGARDING ALCOHOL BEING SOLD ON PREMISES/OFF PREMISES OR BOTH

<i>1(a) Will alcohol be sold for consumption solely ON the premises?</i>	<i>NO</i>
<i>1(b) Will alcohol be sold for consumption solely OFF the premises?</i>	<i>YES</i>
<i>1(c) Will alcohol be sold for consumption both ON and OFF the premises?</i>	<i>NO</i>
<i>*Delete as appropriate</i>	

### Question 2

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

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

### **Question 3**

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

<i>Day</i>	<i>OFF Consumption</i>	
	<i>Opening time</i>	<i>Terminal hour</i>
<i>Monday</i>	10am	10pm
<i>Tuesday</i>	10am	10pm
<i>Wednesday</i>	10am	10pm
<i>Thursday</i>	10am	10pm
<i>Friday</i>	10am	10pm
<i>Saturday</i>	10am	10pm
<i>Sunday</i>	10am	10pm

### **Question 4**

SEASONAL VARIATIONS

<i>Does the applicant intend to operate according to seasonal demand</i>	<i>YES</i>
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*\*If YES – provide details*

The Terminal hour will be 7pm on 26<sup>th</sup> and 27<sup>th</sup> December and 2<sup>nd</sup> and 3<sup>rd</sup> of January each year

### **Question 5**

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

<b>COL. 1</b> <b>5(a)</b> <b>Activity</b>	<b>COL. 2</b> <b>Please confirm</b> <b>YES/NO</b>	<b>COL. 3</b> <b>To be provided</b> <b>during core licensed</b> <b>hours – please</b> <b>confirm</b> <b>YES/NO</b>	<b>COL. 4</b> <b>Where activities are</b> <b>also to be provided</b> <b>outwith core licensed</b> <b>hours please confirm</b> <b>YES/NO</b>
<i>Accommodation</i>	NO	N/A	N/A
<i>Conference facilities</i>	NO	NO	NO
<i>Restaurant facilities</i>	NO	NO	NO
<i>Bar meals</i>	NO	NO	NO
<b>5(b) Activity</b> <b>Social functions</b> <b>including:</b>	<b>Please confirm</b> <b>YES/NO</b>	<b>To be provided</b> <b>during core licensed</b> <b>hours – please</b> <b>confirm</b> <b>YES/NO</b>	<b>Where activities are</b> <b>also to be provided</b> <b>outwith core licensed</b> <b>hours please confirm</b> <b>YES/NO</b>
<i>Receptions including</i> <i>Weddings, funerals,</i> <i>birthdays, retirements</i> <i>etc.</i>	NO	NO	NO
<i>Club or other group</i> <i>meetings etc.</i>	NO	NO	NO
<b>5(c)</b> <b>Activity</b> <b>Entertainment</b> <b>including:</b>	<b>Please confirm</b> <b>YES/NO</b>	<b>To be provided</b> <b>during core licensed</b> <b>hours – please</b> <b>confirm</b> <b>YES/NO</b>	<b>Where activities are</b> <b>also to be provided</b> <b>outwith core licensed</b> <b>hours please confirm</b> <b>YES/NO</b>
<i>Recorded music – see</i> <b>5(g)</b>	YES	YES	YES
<i>Live performances –</i> <b>see 5(g)</b>	NO	NO	NO
<i>Dance facilities</i>	NO	NO	NO
<i>Theatre</i>	NO	NO	NO

<i>Films</i>	NO	NO	NO
<i>Gaming</i>	YES	YES	YES
<i>Indoor/outdoor sports</i>	NO	NO	NO
<i>Televised sport</i>	NO	NO	NO
<b>5(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>
<i>Outdoor drinking facilities</i>	NO	NO	NO
<b>5(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>
<i>Adult entertainment</i>	NO	NO	NO

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

*Recorded music will be played during the trading hours and lottery tickets will be sold during trading hours outwith the core opening times*

5(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.

*In addition to sales of alcoholic drinks there will be sales of soft drinks, groceries, tobacco, newsprint, confectionery, toys, household goods, and pharmaceutical goods*

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5(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?	NO*
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When fully occupied, are there likely to be more customers standing than seated?	NO*
*Delete as appropriate	

**Question 6 (On-sales only)**

*CHILDREN AND YOUNG PERSONS*

6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry	YES/NO*
	*Delete as appropriate	

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

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6(c) *Provide statement regarding the **AGES** of children or young persons to be allowed entry*

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6(d) *Provide statement regarding the **TIMES** during which children and young persons will be allowed entry*

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6(e) *Provide statement regarding the **PARTS** of the premises to which children and young persons will be allowed entry*

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**Question 7**

*CAPACITY OF PREMISES*

*What is the proposed capacity of the premises to which this application relates?*

13.27m2

**Question 8**

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

*Personal details*

8(a)     *Name*

Elizabeth Joanne Worrall

8(b)     *Date of birth*

██████

8(c)     *Contact address*

████████████████████

8(d)     *Email address*

████████████████

8(e) Personal licence

<i>Date of issue</i>	<i>Name of Licensing Board issuing</i>	<i>Reference no. of personal licence</i>
31/08/2019	Edinburgh	259329

**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 ..... [REDACTED] ..... \* (see note below)

Date .....15/01/26.....

Capacity ..... AGENT (delete as appropriate).

Telephone number and email address of signatory ..... [REDACTED] ...

**\* 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.

**Contact Us:**

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