

ITEM 12 – APPLICATION FOR VARIATION OF A PREMISES LICENCE

Premises: Dumbarton Harp Social Club, 143/145 High Street,
Dumbarton G82 1LE.

Applicant: Dumbarton Harp Social Club, 143/145 High Street,
Dumbarton G82 1LE

The following documents relating to the application are included as appendices as detailed below:-

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THE LICENSING (SCOTLAND) ACT 2005**Application for Premises Licences**

Ref: WDLBPREM/0154

Name and Address of Premises: Dumbarton Harp Social Club, 143/145 High Street,
Dumbarton G82 1LE

Applicant/Licence Holder: Dumbarton Harp Social Club, 143/145 High Street,
Dumbarton G82 1LE

Type of Premises: On Sales (Social Club – Full Premises Licence)

Proposed Application: To amend children and young person terms to allow them to be permitted in the licensed premises until 8 pm (other than in exceptional circumstances, for example a wedding or any other pre-booked or ticketed function being held on the premises) and accompanied by an adult.

Police Authority Comments: No Objections

Fire Authority Comments: No Objections

Regulatory Services Comments: No Objections

Community Council Comments: No comments received

Health Board Comments: No Objections

Access Panel: No comments received

Additional Comments: No Objections

Decision:

141 WEST DUNBARTONSHIRE LICENSING BOARD

LICENSING (SCOTLAND) ACT 2005

APPLICATION FOR VARIATION OF PREMISES LICENCE/ PROVISIONAL PREMISES LICENCE*

*Delete as appropriate

If you are completing this form by hand, please write legibly in block capitals using ink.

SECTION 1: APPLICANT INFORMATION

1(a) Name, address, postcode and premises licence number of premises.

Dumbarton Harp Social Club 143/145 high street Dumbarton			
Post Code	G821LE	Premises Licence Ref. No.	WDLBPREM/0154

1(b) Please provide full name, address, postcode, telephone number and e-mail address of applicant.

Dumbarton Harp Social Club 143/145 high street Dumbarton				
Post Code	G821LE	Telephone No.		E-mail address

SECTION 2: MINOR VARIATIONS

2(a) Do you consider the proposed variation to be a minor variation? YES ☐ NO ☒

(If the answer is YES, please complete the rest of Section 2. If NO, please go to Section 3)

2(b) Do you propose a variation to the layout plan which is not inconsistent with the operating plan for the Premises?

YES ☐ NO ☒

(If the answer is YES, please give details of the proposed variation below)

- 2(c) Do you propose to restrict the terms on which children and young persons are admitted to the premises?

YES ☐ NO ☒

(If the answer is YES, please give details of the proposed variation below)

- 2(d) Do you propose to vary the information contained in the licence relating to the premises manager, including variation to substitute a new premises manager?

YES ☐ NO ☒

(If the answer is YES, please complete Section 4 below)

- 2(e) Do you propose any other variation as prescribed by Section 29(6)(d) of the 2005 Act?

YES ☐ NO ☒

(If the answer is YES, please give details of the proposed variation below)

SECTION 3: OTHER VARIATIONS

- 3(a) Do you propose a variation to any of the conditions to which the licence is subject (other than those to which the licence is subject by virtue of Section 27(1))?

☐YES ☒ NO

(If the answer is YES, please give details of the proposed variation below)

3(b) Do you propose to vary any of the information contained in the operating plan contained in the licence?

YES ☒ NO ☐

(If the answer is YES, please give details of the proposed variation below)

Children and young people will be permitted in the licensed premises until 8 p.m. (other than in exceptional circumstances, for example a wedding or any other pre-booked or ticketed function being held on the premises).

They will be accompanied by a responsible adult at all times.

3(c) Do you propose a variation to the layout plan contained in the licence?

YES ☐ NO ☒

(If the answer is YES, please give details of the proposed variation below)

3(d) 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 the answer is YES, please give details of the proposed variation below)

SECTION 4: VARIATION TO SUBSTITUTE NEW PREMISES MANAGER

Please provide details below of the name, address and personal licence number of the Existing Premises Manager.

Reference Number of Personal Licence	

PROPOSED PREMISES MANAGER

4(a) Name and telephone number

Telephone No.	

4(b) Date and place of birth

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4(c) Contact address, including postcode

Postcode	

4(d) Email address

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4(e) Details of Personal Licence held by Proposed Premises Manager

Date of issue	Name of Licensing Board issuing	Reference Number of Personal Licence

(Please enclose a photostat copy of the Personal Licence if it was not issued by West Dunbartonshire Licensing Board).

4(f) Is the variation to substitute a new Premises Manager to take effect during the application period?

YES ☐ NO ☐

(If the answer is NO, please provide the proposed 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.)

I confirm that the contents of this application are true to the best of my knowledge and belief.

The application fee is enclosed. *m*

Signature (See Note 1 below)

Date *29/10/14*Capacity APPLICANT/AGENT (delete as appropriate) *SECRETARY*.

If agent, please provide name, address, telephone number and email address:

John McCowan
8 KILKILTON ROAD
DOONBATHGOWN
GLASGOW

I have enclosed the relevant documents with this application - please tick the relevant boxes	
Premises Licence (See Note 2)	
Operating Plan (See Note 3)	✓
Layout Plans (See Note 3)	
Planning certificate (See Note 3)	
Building standards certificate (See Note 4)	
Food hygiene certificate (See Note 4)	
Copy of Personal Licence	

NotesNote 1:**Data Protection Act 1998**

The information in this form will be used to update the relevant Premises Licence. Accordingly, the information contained in this form may be held on an electronic public register which may be available to members of the public on request.

Note 2:

The application must be accompanied by the Premises Licence to which the application relates, or if that is not practicable, a statement of the reasons for failure to produce the licence.

Note 3:

Where the proposed variation affects the current operating plan, please submit an operating plan including the proposed variations. Where the proposed variation affects the current layout plan, please submit 6 sets of plans showing the proposed new layout of the premises.

Note 4:

Applicants for variations involving structural alterations should submit the relevant Section 50 certificates with their application.

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>YES/NO*</i>
<i>1(b) Will alcohol be sold for consumption solely OFF the premises?</i>	<i>YES/NO*</i>
<i>1(c) Will alcohol be sold for consumption both ON and OFF the premises?</i>	<i>YES/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>	11AM	MIDNIGHT
<i>Tuesday</i>	11AM	MIDNIGHT
<i>Wednesday</i>	11AM	MIDNIGHT
<i>Thursday</i>	11AM	MIDNIGHT
<i>Friday</i>	11AM	1.00AM
<i>Saturday</i>	11AM	1.00AM
<i>Sunday</i>	11AM	MIDNIGHT

Question 3

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

Day	Off Consumption	
	Opening time	Terminal hour
Monday	NOT APPLICABLE	
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Question 4

SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	YES/NO*
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*If YES – provide details

FESTIVE PERIOD AS PER LICENSING BOARD RECOMENDATIONS

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
5(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	NO	N/A	N/A
Conference facilities	YES	YES	NO
Restaurant facilities	NO	NO	NO
Bar meals	YES	YES	NO
5(b) 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
Social functions including:			
Receptions including Weddings, funerals, birthdays, retirements etc.	YES	YES	YES FUNERALS
Club or other group meetings etc.	YES	YES	NO
5(c) 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
Entertainment including:			
Recorded music - see 5(2)	YES	YES	NO
Live performances see 5(2)	YES	YES	NO
Dance facilities	YES	YES	NO
Theatre	YES	YES	NO

Films	YES	YES	NO
Gaming	YES	YES	NO
Indoor/outdoor sports	YES	YES	NO
Televised sport	YES	YES	NO
5(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	NO	NO
5(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			

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

Occasionally the club is requested to service a request such as opening early to meet funeral mourners only from 9-11am

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.

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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?	YES/NO*
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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

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

Children and young people will be permitted in the licensed premises until 8pm.(other than in exceptional circumstances, for example for a wedding or other pre-booked or ticketed functions being held on the premises).

They will be accompanied by a responsible adult at all times.

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

CHILDREN UP TO 16 YEARS

YOUNG PEOPLE 17-18 YEARS

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

CHILDREN AND YOUNG PEOPLE WILL BE ALLOWED ON THE LICENSED PREMISES UNTILL 8PM OTHER THAN EXCEPTIONAL CIRCUMSTANCES, FOR EXAMPLE A WEDDING OR OTHER PRE-BOOKED OR TICKETED FUNCTION BEING HELD ON THE PREMISES WHERE THEY WILL HAVE ACCESS FOR THE DURATION OF THE FUNCTION.

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

IN ALL AREASS WHERE PUBLIC HAVE ACCESS

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Question 7*CAPACITY OF PREMISES*

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

500

Question 8

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

Personal details

8(a) *Name*

PETER CONLIN

8(b) *Date of birth*

3 RD FEBRUARY 1968

8(c) *Contact address*

23 ROWAN DRIVE

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>
03/10/09	WDLB	WD/0440

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 29.10.14

Capacity Supervisor ~~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.

