Item No:

# ITEM 12 – APPLICATION FOR PROVISIONAL PREMISES LICENCE

Premises: 16 Castlehill Road, Dumbarton G82 5BL.

Clyde Lets Retail Ltd, c/o Dylan Associates, 32a Stromness Street, Glasgow G5 8HS. Applicant:

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

<u>List of Productions</u>		Page (s)
Appendix 1	Details of proposed application and consultee responses	Pages 87 - 88
Appendix 2	Application Form (with detailed Operating Plans)	Pages 89 - 103
Appendix 3	Letter of representation from West Dunbartonshire Community Health & Care Partnership	Pages 105 - 106
Appendix 4	Objection from Lynn Hume-Ross	Page 107
Appendix 5	Objection from Helen Cairney	Page 109
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Appendix 9	Objection letter from Jackie Baillie MSP	Pages 125 - 126
Appendix 10	Petition in support of the proposed Application	Pages127 - 139

# THE LICENSING (SCOTLAND) ACT 2005

# <u>Application for Provisional Premises Licences</u>

## **OBJECTIONS/REPRESENTATION**

Ref:

WDLBPREM/0279

Name and Address of Premises:

16 Castlehill Road, Dumbarton G82 5BL

Applicant/Licence Holder:

Clyde Lets Retail Ltd, c/o Dylan Associates,32a

Stromness Street, Glasgow G5 8HS

Type of Premises:

Off-Sales

**Proposed Application:** 

The premises are for an off-sales which will include a small café area where children with appropriate adults will be able to have very light food (no alcohol will be sold in the café area). The sale of alcohol for consumption off the premises

will be Monday to Sunday 10 am to 10 pm.

**Police Authority Comments:** 

No Objections

**Fire Authority Comments:** 

No Objections

## **Regulatory Services Comments:**

LSO

This application is contrary to the Board's Overprovision Policy.

Community Council Comments: No active Community Council for this area

**Health Board Comments:** 

Representation

Access Panel:

No comments received

**Additional Comments:** 

No comments received

# Section 50 Certificates:

Planning - Received 25.04.14

Decision:

# West Dunbartonshire Licensing Board

# APPLICATION FOR PREMISES LICENCE\*

\*Delete as appropriate

Licensing (Scotland) Act 2005, section 20

APPLICANT INFORMATION Licensing (Scotland) Act 2005, section 20(1)

### **Question 1**

Name, address and postcode of premises to be licensed.

16 Du	Castlehill Road Imbarton GB2 5BL (formerly known as The Keep Bar)
Quest	ion 2
Partic	ulars of applicant
2(a)	Where applicant is an individual, provide full name, date and place of birth, and home address including postcode.

2(b)	Where applicant is a partnership, please provide full name, and postal address of partnership.
2(c)	Where applicant is a company, please provide name, registered office and company registrat
C 32 Co	lyde Lets Limited, c/o Dylan Associates  a Stromness Street, Glasgow G.5 8 HS  . Registration No SC 405035
2(d)	Where the applicant is a club or other body, please provide full name, and postal address of cl or other body.
(e) Wh	nere applicant is a partnership, company, club or other body, please provide the names, dates an places of birth, and home addresses of connected persons.*

<sup>\*</sup> Connected person is defined in section 147(3) of the Licensing (Scotland) Act 2005.

### Question 3

Previous applications

3 Has the applicant been refused a premises licence under section 23 of the Licensing (Scotland)
Act 2005 in respect of the same premises?

YES/NO\*\*

If YES - provide full details

11-7	b				
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reguser	The application	h on the got	unds that	1210Vor0	1751516
applica	the supposation and (b) fair	use to men	A Hine 1	1000	37-1-6
<i>\</i>		are in mos	- / ruir L	way my	recuves,

### Question 4

Previous convictions

4 Has the applicant or any connected person ever been convicted of a	YES/NO*
relevant or foreign offense (1)	1,00,110

<sup>\*</sup>If YES - provide full details

For the purpose of this Act, a conviction for a relevant offence or foreign offence is to be disregarded if it is spent for the purpose of the Rehabilitation of Offenders Act 1974

Name & position (if) applicable) =	Date of conviction or sentence	Cowl	Offerice	Renally

<sup>(1)</sup> In addition to any convictions held by the applicant at the time of application, applicants should also familiarise themselves with the contents of section 24(1) of the Licensing (Scotland) Act 2005 in respect of any convictions for relevant or foreign offences which they may receive during the period beginning with the making of the premises licence application and ending with determination of the application.

# DESCRIPTION OF PREMISES Licensing (Scotland) Act 2005, section 20(2)(a)

0.000	Section 1	
Oues	43 ~~	-
ULLES	HUH	

5 Description of p question 6)	remises (where application is sut	bmilled by a members' club,	please also complete
I forms part of a semi-det	16 Castlehill Road Dumbarton ached building annexed to an energy and a contract of the cont	mnty Chinada radioment T	ha invancioner
	<b>10</b> 2 S		7
	100		
•	- a		8
To be completed to  Do the club's constitution  the requirements of re  Licenting Clubs. (Sci	y members' clubs only  and fules conform to	YES/NO*	
Lisending (Clubs) (Sec 2007211		**************************************	
DECLARATION BY AF	PLICANT OR AGENT ON BE	HALF OF APPLICANT	
If signing on behalf of the	applicant please state in what	capacity.	
I'he contents of this Applic	ation are true to the best of my ki	iowledge and belief,	
Signature .	* (see note bel	ów).	×,
Date S. R	steamtunaises		
Tapacity A. 9. F. C. T.		e as appropriate).	

Telephone number and email address of signatory .......

McArthur Stanton

Pperaling plan	
ayout plan	
lanning cerlificate	V
Building standards eerrificate	

### \* 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:

West Dunbartonshire Licensing Board Council Offices Rosebery Place Clydebank G81 1TG

Phone: 01389 738701 Fax: 01389 738674

Email: marie.mccran@west-dunbarton.gov.uk

Romuse by the lace	
Application	checklist
Date received	
Ree amount	
Receipt number	
Received by (INITIALS)	
Consideration date	
Last date for consideration	
Date of initial hearing	
Date of any modification hearing	
Date:granted/refused	
(delete as appropriate)	

- Rorause by the Lice	nsling Board only			
If application is for a premises licence				
Documents	regulred			
Operatingplan				
Layoutaplan				
Planningceathreate				
Bullding standards certificate				
Rood hygiene certificate				

Ror use by the Licensing Board only	
If application is for a provisional premises licence	
Documents) required	
Provisional planning:certificate	$\dashv$
Operating plan	-
Layout plan	Ī

# ADDITIONAL MATERIAL – PREMISES LICENCE APPLICATION LODGED NO LATER THAN 16TH JANUARY 2009

Is there a licence under the Licensing (Scotland) Act 1976 held in respect of the premises?

YES/NO\* (\*Delete as appropriate) There was formerly a Public House Licence.

If so, do you consider the application to be a "Grandfather Rights" application (i.e. one falling within article 18 or 19 of the Licensing (Transitional and Saving Provisions) (Scotland) Order 2007)?

YES/NO\* (\*Delete as appropriate)

# **OPERATING PLAN**

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

# Question 1

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

	· ····································
<u> Etty particulation and an edistilipitous onery. On the premises /                                   </u>	YZS/NO*
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES/NG*
I(c) Will alcohol be sold for consumption both ON and OEt the premises?	Y#\$/NO*
Melete 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		
Tuesday		
Wednesday		
Thursday.		
Eriday.		
Saturday		
Sunday		

### Question 3

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

-Day	OFF Consumption	
	Opening time	Terminal hour
Monday .	10 am	10 pm
Tuesday.	10 am	10 pm
Wednesday.	10 am	10 pm
Thursday	10 am	10 pm
Briday	10 am	10 pm
Saturday	10 am	10 pm
-Sunday	10 am	10 pm

### Question 4

SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	
- Dogs the applicant this water constitution of the constitution o	VICC/XIO*
about me applicant interest to operate according to according acting act	YES/NO*
The state of the s	- 104.07.07

\*If YES - provide details

All in terms of West Dunbartonsine Licensing Boara's Spasonal Variations recommendations.

Question 5

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

GOI-L	C(0)L,2	(c(0)1 <sub>7</sub> ,3	[ (CO)5,4
5(a)	Please confirm		Where activities are
Activity	Ypszno	during core licensed hours – please	also to be provided
		confirm	hours please confirm
		YES/NO	YES/NO
Accommodation	No	N/A	N/A
Conference facilities	No * Yes a CAFE		
Restaurant facilities	<b>5</b>	-	
Barmeals	No		
S(b) Activity	Please confirm	To be provided	Where activities are also to be provided
Social functions And addings	I YES/NO	hours - please	outwith core licensed
		SNE SNO	hours please confirm  VES/NO
Receptions including	No	No	
Weddings, fimerals		7,40	No
birthdays, reduements etc.	No		
Club-or other group	No	No	No
meetings etc.	/ ¥ U	170	700
5(0)	Please confirm	To be provided	
Activity.	YESAYO	hours – please	also to be provided outwith core licensed
Entertainment Includings			hours please confirm
		YES/NO.	
Recorded music — see S(g)	Yes	Yes	No
lilve-performances —	No	No	No
see 5(g)	M.,	No	NO.
Dance facilities	No	No	NO NO
Theatre	No	/ / / /	' V (/

\* NB. Seated area will be a cafe serving light snacks hot or ald but NO Alcohol

	r		T
Pilms	No	No	No
Gaming	No	No	No
Indoor/outdoor sports	No	No	No
Televised-sport	Yes	Yes	N6
5(a) Activity	Please confirm YES/NO	during core licensed hours — please	Where activities are also to be provided outwith core licensed hours please confirm
		YES/NO	YES/NO
Outdoor drinking Jacilities	Nο	No	N 6
S(0) Activity	Please confirm  YES/NO	To be provided during core licensed hours — please confirm	also to be provided outwith core licensed
Adult entertainment	N	Νo	No

below.	чиет аеган.
5(f) any other activities	
If you propose to provide any activities other than those listed in $5(a)$ – (e) please provide further information in the box below.	e details or

# 5(g) Late night premises opening after 1.00am

Whe deci	ere you have confirmed that you are providing live or recorded music, will the bel-level-exceed 85dB?	YES/NO*
	en fully occupied, are there likely to be more customers standing than seated?	YES/NO*
	stion 6 (On-sales only)	
CHI	LDREN AND YOUNG PERSONS	
6(a)	When alcohol is being sold for consumption on the premises will children or young persons be allowed entry  Delete as appropriate	YES/NO*
6(a),	young persons be allowed entry	YES/NO*

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

Children of any age provider they are accompanied by a parent or other authorises adult.

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

During the continuo statell in Question 3.

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

in the seated area and Shop area defined in the accompanying plans

# Question 7

CAPACITY OF PREMISES

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

* AL	COHOL DICHONY AREA = 69,00 m2  EATING AREA (in CAFE' = 11.80 m2  COHOL DICHONY AREA = 17.5 m2			
Question 8				
PRE. licen	MISES MANAGER ( <b>NOTE:</b> not required where application is for grant of provisional premice)			
Perso	onal details			
8(a)	Name			
8(b)	Date of birth			
8(c)	Contact address			
8(d)	Email address			

\* TO AMENDED ON BEHINLE OF MEACHUR STANTON (W)

### 8(e) Personal licence

Date of Issue	Name of Licensing Board	Reference no. of personal licence
Dute o) issue	issuing	
		nce/ice
1		

# 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.				
•	M'Arthur Stanton			
Signature * (see note below)				
Signature * (see note below)  Date 24/4/2014	40 High St. DUMBARTON G82			
Capacity	ENT (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.

#### Contact Us:

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Email: marie.mccran@west-dunbarton.gov.uk

# PLEASE NOTE CONFIDENTIAL PAGES HAVE BEEN REMOVED