

ITEM 8 – APPLICATION FOR VARIATION OF A PREMISES LICENCE

Premises: Aldi, 5 Kilbowie Retail Park, Montrose Street West,
Clydebank G81 2QB

Applicant: Aldi Stores Limited, Holly Lane, Atherstone,
Warwickshire CV9 2SQ

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

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Appendix 2	Application Form (with detailed Operating Plans)	Pages 76 - 87

THE LICENSING (SCOTLAND) ACT 2005

Application for Variation of Premises Licence**Ref:** WDLBPREM/0116**Name and Address of Premises:** Aldi, 5 Kilbowie Retail Park, Montrose Street West,
Clydebank G81 2QB**Applicant/Licence Holder:** Aldi, Stores Limited, Holly Lane, Atherstone,
Warwickshire CV9 2SQ**Type of Premises:** Off-Sales (Supermarket)**Proposed Variation:**

- 1) To increase the hours from 8 pm to 10 pm Monday to Sunday..
- 2) To amend the other activities on the Operating Plan to read "Sale of Goods consistent with the business of a supermarket including outwith core hours".
- 3) To decrease the permanent alcohol capacity from 21.42sq metres to 21.37sq metres and then to increase the capacity by 9sq metres for a set period each year to incorporate additional lines/products stocked exclusively for Christmas. This will make the total alcohol display area 30.75sq metres between 24 November and 9 January each year.

Police Authority Comments: No Objections**Fire Authority Comments:** No Objections**Regulatory Services Comments:****LSO**

Application is contrary to the Board's Licensing Policy in terms of Part 4 - Overprovision. Increase of capacity is approximately 42%.

Community Council Comments: No comments received**Health Board Comments:** No Objections**Access Panel:** No comments received

Additional Comments:

No comments received

Decision:

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.

Aldi 5 Kilbowie Retail Park Montrose Street West Clydebank			
Post Code	G81 2QB	Premises Licence Ref. No.	

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

Aldi Stores Limited Holly Lane Atherstone Warwickshire				
Post Code	CV9 2SQ	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)

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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)

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- 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)

At Q2 of the operating plan, to increase the terminal hour from 8pm to 10pm, seven days a week.

At Q5(f) of the operating plan regarding any other activities:
"Sale of other goods consistent with the business of a supermarket including outwith core hours."

At Q7 of the operating plan regarding capacity:
"Alcohol display 11.875 x 1.8sq metres, total 21.375sq metres. Between 24 November and 9 January each year, there will be a seasonal display of 9sq metres, which is a total capacity of 30.375sq metres."

- 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)

To decrease the permanent capacity from 21.42sq metres to 21.375sq metres (as shown on block red on plan no 0114 #74 AL(76)002). Also to increase capacity by 9sq metres (as shown hatched red on plan) for a set period each year to incorporate additional lines/products stocked exclusively for Christmas. This will make the total alcohol display area 30.375sq metres between 24 November and 9 January each year.

- 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)

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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).

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 / / /

Signature (See Note 1 below)

Date 23 October 2014.....

Capacity APPLICANT/AGENT (delete as appropriate)

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

..... Niall J Hassard, Lindsays, 1 Royal Bank Place, Glasgow, G1 3AA

.....

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

Notes

Note 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.

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.

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

OPERATING PLAN

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

Question 1

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

1(a) Will alcohol be sold for consumption solely ON the premises?	NO
1(b) Will alcohol be sold for consumption solely OFF the premises?	YES
1(c) Will alcohol be sold for consumption both ON and OFF the premises?	NO
*Delete 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	N/A	N/A
Tuesday	N/A	N/A
Wednesday	N/A	N/A
Thursday	N/A	N/A
Friday	N/A	N/A
Saturday	N/A	N/A
Sunday	N/A	N/A

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>	10.00 am	10.00 pm
<i>Tuesday</i>	10.00 am	10.00 pm
<i>Wednesday</i>	10.00 am	10.00 pm
<i>Thursday</i>	10.00 am	10.00 pm
<i>Friday</i>	10.00 am	10.00 pm
<i>Saturday</i>	10.00 am	10.00 pm
<i>Sunday</i>	10.00 am	10.00 pm

Question 4*SEASONAL VARIATIONS*

<i>Does the applicant intend to operate according to seasonal demand</i>	<i>NO</i>
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**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	COL. 2	COL. 3	COL. 4
5(n) 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	NO	NO	NO
Restaurant facilities	NO	NO	NO
Bar meals	NO	NO	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.	NO	NO	NO
Club or other group meetings etc	NO	NO	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(g)	NO	NO	NO
Live performances see 5(g)	NO	NO	NO
Dance facilities	NO	NO	NO
Theatre	NO	NO	NO
Films	NO	NO	NO

Aldi, Kilbowie Retail Park

Gaming	NO	NO	NO
Indoor/outdoor sports	NO	NO	NO
Televised sport	NO	NO	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	NO	NO	NO

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

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.

Sale of other goods consistent with the business of a supermarket including outwith core hours.

5(g) Late night premises opening after 1.00am

Where you have confirmed that you are providing live or recorded music, will the decibal level exceed 85dB?	N/A
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When fully occupied, are there likely to be more customers standing than seated?	N/A
*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?	N/A
	*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?

Total alcohol display area – 30.375sq metres.

Permanent alcohol display area (shown in block red on attached plan) 21.375sq metres.

Additional seasonal display (shown in hatched red on attached plan) 9sq metres to be used between 24 November and 9 January each year.

Question 8

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

Personal details

8(a) *Name*

Paul Robert Hamilton

8(b) *Date of birth*

18 April 1983

8(c) *Contact address*

25 Boyd Orr Road

Saltcoats

North Ayrshire

KA21 6EW

8(d) Email address

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8(e) Personal licence

<i>Date of issue</i>	<i>Name of Licensing Board issuing</i>	<i>Reference no. of personal licence</i>
1 September 2009	North Ayrshire Licensing Board	NA/0694

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)

Date23 October 2014.....

Capacity APPLICANT/AGENT (delete as appropriate).
Telephone number and email address of signatoryNiall Hassard
Lindsays
1 Royal Bank Place
Glasgow, G1 3AA

* Data Protection Act 1998

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