

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?	NO
1(c) Will alcohol be sold for consumption both ON and OFF the Premises?	YES 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 Hours
Monday	12noon	10pm
Tuesday	12noon	10pm
Wednesday	12noon	10pm
Thursday	12noon	10pm
Friday	12noon	10pm
Saturday	12noon	10pm
Sunday	12noon	10pm

Question 3

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

Day	OFF Consumption	
	Opening time	Terminal Hours
Monday	10am	10pm
Tuesday	10am	10pm
Wednesday	10am	10pm
Thursday	10am	10pm
Friday	10am	10pm
Saturday	10am	10pm
Sunday	10am	10pm

Question 4

SEASONAL VARIATIONS

Does the applicant intend to operate according to seasonal demand	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO*
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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 5(a) Activity	COL.2 Please confirm YES/NO	COL.3 To be provided during core licensed hours - please confirm YES/NO	COL.4 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	NO	NO	NO
5 (b) Activity Social functions including:	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
Receptions including Weddings, funerals, birthdays, retirements etc	NO	NO	NO
Club or other group meetings etc	YES	YES	NO
5(c) Activity Entertainment including:	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
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
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, please provide further details below.

N/A

5 (f) any other activities

If you proposed to provide any activities other than those lists in 5 (a) – (e) please provide details or further information in the box below.

OUR LIBRARY SPACE (THE MEETING ROOM) IS PRIMARILY TO BE USED FOR TASTINGS DURING TOURS OF OUR FACILITY, FOR OFF-SALE COLLECTIONS, AND WE MAY ON OCCASION USE THE SPACE IN COLLABORATION WITH CLUBS OR OTHER BUSINESSES AS A CONFERENCE SPACE.

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 *
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When fully occupied, are there likely to be more customers standing than seated?	YES /NO*
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*Delete as appropriate	
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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*
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*Delete as appropriate	
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6(b) Where the answer to 6(a) is YES provide statement of the **TERMS** under which they will be allowed entry.

N/A

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

N/A

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

N/A

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

N/A

Question 7

CAPACITY OF PREMISES

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

TEN PEOPLE

Question 8

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

8 (a) Name

ADAM FUREGIRAJ

8 (b) Date of birth

19-1-82

8 (c) Contact address

227 CORNHILL DRIVE, AJEROLEN, AJ16 5HW

8 (d) Email address

ADAM@DOCTORADAMS.CO.UK

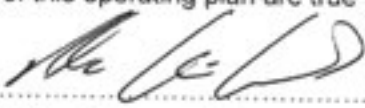
8 (e) Personal licence

Date of issue	Name of Licensing Board issuing	Reference no. of personal licence
21-3-18	ABERDEEN CITY	AC5218

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICATION

If signing on behalf of 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 8-11-19

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

Telephone number and email address of signatory
07714099920 / ADAM@DOCTORADAMS.CO.UK

Postal Address of Agent (if appropriate) N/A

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*** 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.