

Aberdeen
Application for premises licence or provisional premises licence
Licensing (Scotland) Act 2005

For help contact Licensing@aberdeencity.gov.uk Telephone: 01224 522499

\* required information

Section 1 of 8		
You can save the form at any	y time and resume it later. You do not need to l	be logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	08112019	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on behalf of the applicant?  O Yes  No		Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Adam	
* Family name	Elmegirab	
* E-mail	info@doctoradams.co.uk	
Main telephone number	01224582992	Include country code.
Other telephone number	07714099920	
☐ Indicate here if you wo	ould prefer not to be contacted by telephone	
Are you:		
<ul><li>Applying as a business</li><li>Applying as an individ</li></ul>	s or organisation, including as a sole trader lual	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
* Is your business registered in the UK with Companies House?	Yes	
* Registration number	SC436934	
* Business name	Dr. Adam Elmegirab's Bitters Ltd	If your business is registered, use its registered name.
* VAT number GB	153723810	Put "none" if you are not registered for VAT.
* Legal status	Private Limited Company	

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* Your position in the business	Founder & Director			
Home country	United Kingdom	The country where the headquarters of your business is located.		
Registered Address		Address registered with Companies House.		
* Building number or name	The House of Botanicals			
* Street	Arch 4, Palmerston Road			
District	V			
* City or town	Aberdeen			
County or administrative area	Aberdeen City			
* Postcode	AB11 5RE			
* Country	United Kingdom			
Section 2 of 8				
FURTHER DETAILS ABOUT TH	IE APPLICANT			
* Are you applying as an indivi	dual (includes sole traders)?			
○ Yes	No			
* Are you applying as a members' club?				
O Yes	No			
Section 3 of 8				
CONNECTED PEOPLE				
is a partnership), OFFICE BEAR		(if the applicant is a company), all PARTNERS (if it S of the business or premises and all MANAGERS of ns which may clarify exact requirements.		
* Are there any such people fo	r whom you need to provide details?			
○ Yes	No			
Section 4 of 8				
PREMISES TO BE LICENSED				
* Name of premises/ trading name	The House of Botanicals			

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Premises Address		
Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details
Yes	O No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
* Building number or name	The House of Botanicals	
* Street	Arch 4, Palmerston Road	
District		
* City or town	Aberdeen	
County or administrative area	Aberdeen City	
* Postcode	AB11 5RE	
* Country	United Kingdom	
Contact Details		
Are the contact details the san	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details
Yes	C No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail	info@doctoradams.co.uk	
* Main telephone number	01224582992	
Other telephone number	07714099920	
Description		
* Provide a description of the p	premises	
Production premises for Dr. Ad	dam's Bitters, House of Botanicals spirits, and Pi	etro Nicola aperitivi & digestivo
Section 5 of 8		
APPLICATION DETAILS		
* Type of application:		
Premises licence	E TO STATE CONTROL OF	
O Provisional premises lice	nce	
You must submit the following - Operating plan - Layout plan - Planning certificate - Building standards certificat - Food hygiene certificate (if a		

Continued from previous page		
Previous Applications		
* Has the prospective licence holder, or any connected person, previously been refused a premises licence for the same premises?		
C Yes   No		
Section 6 of 8		
CONVICTIONS		
* Has the prospective licence holder, or any connected person, ever been convicted of a relevant or foreign offence?		
C Yes © No		
The definition of a "relevant or foreign offence" is set out in The Licensing (Relevant Offences) (Scotland) Regulations 2007. A conviction is to be disregarded if it is spent for the purposes of the Rehabilitation of Offenders Act 1974 (or equivalent legislation).  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 between making the		
application and the determination of the application.		
Section 7 of 8		
ADDITIONAL DETAILS		
Provide any additional information which is required or relevant to your application (check for local guidance notes and conditions which may provide details of specific requirements in your area)		
Section 8 of 8		
PAYMENT DETAILS		
This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.		
Category 1 ((a) Premises not entered on the valuation roll or have a nil valuation. (b) Premises whose main function is to provide a visitor attraction, (c) they are used wholly or mainly for the purposes of a club and (d) their main function is to provide accommodation that are not open to the public other than for the provision of accommodation, and any alcohol sold is to be consumed on the premises by guests being accommodated there.) £160.00		
Category 2 - Rateable value: £1 to £11,500 £640.00		
Category 3 - Rateable value: £11,501 to 35,000 £880.00		
Category 4 - Rateable value: £35,001 to £70,000 £1040.00		
Category 5 - Rateable value: £70,001 to £140,000 £1360.00		
Category 6 - Rateable value: above £140,000 £1600.00 Please note that you must also complete the form 'Submit an operatin plan with a variation' and submit it at the same time as you submit this application.		
* Fee amount (£)   640.00		

Continued from previous page... **ATTACHMENTS AUTHORITY POSTAL ADDRESS Address** Building number or name Street District City or town County or administrative area Postcode Country United Kingdom **DECLARATION** \* The contents of this application are true to the best of my knowledge and belief. Ticking this box indicates you have read and understood the above declaration This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?" \* Full name \* Capacity Date (dd/mm/yyyy) Add another signatory

Once you're finished you need to do the following:

- 1. Save this form to your computer by clicking file/save as...
- 2. Go back to <a href="https://www.gov.uk/apply-for-a-licence/premises-licence-2/aberdeen/apply-1">https://www.gov.uk/apply-for-a-licence/premises-licence-2/aberdeen/apply-1</a> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

