

ABERDEEN CITY LICENSING BOARD
APPLICATION FOR VARIATION OF PREMISES LICENCE

Licensing (Scotland) Act 2005, section 29/31

Complete all sections of the application form.

SECTION 1 - TYPE OF VARIATION

Tick one box only

Is the application for a variation in terms of section 29 (5)? ☒ See note 1

Is the application for a minor variation in terms of section 29 (6)? ☐ See note 2

SECTION 2 - APPLICANT INFORMATION

a) Name, address and postcode of premises

Name of premises	Gilcomston Bar
Address of premises (including postcode)	5 Gilcomston Steps Aberdeen AB25 1UW

b) Particulars of premises licence holder

Name of premises licence holder	Trust Inns Limited
Address (including postcode)	Blenheim House, Ackhurst Park, Foxhole Road, Chorley, PR7 1NY

c) Premises Licence

I have enclosed the premises Licence	YES ☐	NO* ☒
*If No please provide reason(s) for failure to produce the premises licence		
Lodged by email		

SECTION 3 - DETAILS OF VARIATION

a) Is the variation to any local condition(s)? YES ☐ NO ☒

If YES, describe below which condition(s) is to be varied and the variation sought

b) Is the variation to the Operating Plan? YES ☒ NO ☐

If YES attach to this application the proposed operating plan and describe below the variation sought – continue on a separate page if necessary.

Q2 - Allow a terminal hour of 1am Monday to Sunday

Q5 - add bar meals as an activity during and outwith core hours

c) Is the variation to the layout plan? YES ☐ NO ☒

If YES, submit 6 copies of the proposed plan and describe below the variation sought – continue on a separate page if necessary.

- d) Do you propose to vary any other information contained or referred to in the licence, including any addition, deletion or other modification? YES ☐ NO ☒

If YES please provide details below.

- e) Do you propose to vary the information contained in the licence relating to the details of the current premises manager? (e.g. Change of address) YES ☐ NO ☒

If YES please provide details below.

- f) Are you intimating the substitution of a new premises Manager? YES ☐ NO ☒

Please provide details below:

- (i) Name of proposed premises manager

- (ii) Date of birth of proposed premises manager

- (iii) Postal address of proposed premises manager

(iv) Email address and telephone number of proposed premises manager

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(v) Personal licence details of proposed premises manager

Date of issue	Name of Licensing Board issuing	Reference no. of personal licence

Please note that the holder of a Personal Licence may only be named as the Premises Manager of one premises in Scotland at any time subject to Article 4 of the Licensing (Vessels etc.) (Scotland) Regulations 2007.

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 Application are true to the best of my knowledge and belief.

Signature Alison Smith Print Name Alison Smith * (see note below)

Date 09.07.25

Capacity: APPLICANT / AGENT (delete as appropriate)

Telephone number and email address of signatory

Postal Address of Agent (if appropriate) ... TLT Solicitors

9th Floor

41 West Campbell Street

Glasgow

G2 6SE

I have enclosed the relevant documents with this application – please tick the relevant boxes

Application Fee	
Premises Licence	
Operating plan (If appropriate)	
Layout plan (if appropriate)	
Draft Operating Plan (if appropriate)	
Amended Layout plan (if appropriate)	