A30173/1

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)?					
Is the application for a minor variation in terms of section 29 (6)? See note 2					
a) Name, address and postcode of premises					
Name of MOOSS H					
Address of premises (including postcode) Address of AS 499 GREAT WESTERN ROAD, ABERDEEN AB 106 NN					
postcode) ABERDEEN AB 106 NN					
b) Particulars of premises licence holder					
Name of premises licence holder MOOSSH LTD					
Address (including postcode) DRUMGARTH, INCHGARTH ROAD, ABIS 9NX					
c) Premises Licence					
I have enclosed the premises YES NO* Licence					
*If No please provide reason(s) for failure to produce the premises licence					
BY EMAIL					

SECTION 3 - DETAILS OF VARIATION

a) Is	the variation to any local condition(s)?	YES NO
If YES, de	escribe below which condition(s) is to be varied	d and the variation sought
b) I:	s the variation to the Operating Plan?	YES NO
variation	ttach to this application the proposed opera sought – continue on a separate page if neces	esarv
QUE	ESTION 2. AMEND ON FRIDAY TO HAVE TERMINA	L HOUR AT CO: CO RMANCES SECTION TO
c) Is	s the variation to the layout plan?	YES NO 🔀
	submit 6 copies of the proposed plan and de on a separate page if necessary.	escribe below the variation sought -

d)	Do you propose to vary any other information contained or referred to in the licence, including any addition, deletion or other modification?			
_	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 \(\subseteq \text{NO } \subseteq \text{X} \)			
	If YES please provide details below.			
Г				
f)	Are you intimating the substitution of a new premises Manager? YES ☒ NO ☐			
	Please provide details below:			
	(i) Name of proposed premises manager			
	RICHARD MATTHEW			
	(ii) Date of birth of proposed premises manager			
	(iii) Postal address of proposed premises manager			

(iv) Email address and teleph	none number of propose	d premises manager
(v) Personal licence details	of proposed premises m	anager
(1) 1 orderial neeries details	or proposed premises m	anager
Date of issue	Name of Licensing	Reference no. of personal
	Board issuing	licence
12 M Cle 12020	ACC	AC2380
12.		110
Please note that the holder of	a Personal Licence me	ay only be named as the Premises
Manager of one premises in S	cotland at any time su	bject to Article 4 of the Licensing
(Vessels etc.) (Scotland) Regu		ajout to / it tions . Or the Literature
DECLARATION BY APPLICANT (OR AGENT ON BEHALF (OF APPLICANT
/)	
If signing on behalf of the applica	ant please state in what o	capacity.
	e best of my kno	wledge and belief DAMCON
	An 1	wledge and belief. DAWSON AMS * (see note below)
	int Name.	(see note below)
Capacity: APPLICANT / AGENT	(delete as appropriate)	
Telephone number,and email addre	ass of signatory	
receptione number, and email additi	ess of signatory A.	
Postal Address of Agent (if appropri	indta)	
	•••••	
I have enclosed the relevant dee	umanta with this applica	tion - please tick the relevant boxes
Application Fee	unients with this applica	tion - please tick the relevant boxes
Premises Licence	/	
Operating plan (If appropriate)	/	
Layout plan (if appropriate)		
Draft Operating Plan (if appropr	iate)	
Amended Layout plan (if approp		