|  |  |
| --- | --- |
| **Licensing (Scotland) Act 2005, Section 29**  **Application for Variation other than Minor Variation** | **Fife Licensing Board logo** |
| **This application should only be completed by the Licenceholder of the appropriate Premises Licence or their Agent.** | |

**Section 1: Type of Variation**

This application for Variation other than a Minor Variation of Premises Licence is made under Section 29(5) of the Licensing (Scotland) Act 2005 in order to vary-

*(Tick all relevant boxes)*

Any of the Conditions to which the Premises Licence is subject

Any of the information contained within the Operating Plan

The Layout Plan

Any other information contained or referred to in the licence (including any addition, deletion or other modification).

(Provide Details)

…………………………….……………………………………………………………………

**Section 2: Premises Licence Details**

***2(a) Licence Number of Premises***

|  |
| --- |
|  |

***2(b) Name and Address of Premises***

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| **Post Code** |  | **Phone No.** |  |

***2(c) Full Name and Address of Current Licenceholder***

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| **Post Code** |  | **Phone No.** |  |

CFP/V6.1/09-05-28/APP FOR VARIATION OTHER THAN MIN VAR/FJ/PD

- 2 -

**section 3: Nature of Variation**

Complete the relevant section(s) regarding the variations sought:-

**3(a) Variation to the Conditions to which the Premises Licence is subject**

Provide details of the Condition(s) to be varied and the variation being sought

|  |
| --- |
|  |

**3(b) Variation to the information contained within the Operating Plan of the Premises Licence**

Provide a copy of the proposed operating plan and highlight below the proposed changes. (**See Note 1**)

|  |
| --- |
|  |

**3(c) Variation to the Layout Plan of the Premises Licence**

7 Copies of the proposed Layout Plan **must** accompany this application. (**See Note 2**)

In addition please provide details below of the proposed change to the layout of the Premises.

|  |
| --- |
|  |

- 3 -

**3(d) Variation to any other information contained or referred to in the licence**

Provide details below of any other variation sought to the Premises Licence

*(e.g. Alteration to the description of the premises contained within the Premises Licence)*

|  |
| --- |
|  |

**Section 4: Licence to be Amended**

(See note 3 & 4 below)

Does the appropriate Premises Licence accompany this application?

**YES**   **NO**

If the answer is **NO**, please provide an explanation.

I am unable to produce the Premises Licence because…

The licence has not yet been issued by the Board

The licence has already been returned to the Board in respect of an earlier application for variation or transfer

Other (provide details)

…………………………………………………………………………

**Section 5: Fee Payable**

The fee payable in respect of the application for variation is **£200**

If the application is submitted alongside an application for Transfer of Premises Licence then the combined fee for both applications will be **£215** (see note 5 below)

If submitted with an application for transfer, please specify the order in which the applications are to be considered-

Application for Transfer of Premises Licence followed by Application for Variation

Application for Variation followed by Application for Transfer of Premises Licence

**Online payments can be made at:** [**www.fife.gov.uk**](http://www.fife.gov.uk) **click Pay then Make a Payment, Click Liquor Licence from the list, add your reference as your FLB number or Premises Name.**

**Please attach a copy of the receipt with this application, which is your proof of payment.**

- 4 -

**Declaration by Applicant or Agent on Behalf of Applicant**

***If signing on behalf of the applicant please state in what capacity.***

I confirm that (a) the contents of this Application are true to the best of my knowledge and belief; and (b) the appropriate fee of £ is enclosed.

**Signature**

…………………………………………………………………………………. (See note 6 below)

**Date**

……………………………………………………………………………………………………………..

Capacity: APPLICANT / AGENT (delete as appropriate)

**If agent, please provide name, address,**

**phone number and (if applicable) email address** ………………………………………..

………………………………………..

………………………………………..

**Note 1**:

Please note that the proposed Operating Plan **must** contain any aspects of the current Operating Plan that are to be preserved should the variation be granted. (e.g. If the current Operating Plan allows a premises to have ‘live performances’ but this is not requested on the proposed Operating Plan then the Licensing Board would view such an omission as a request to have ‘live performances’ deleted from the Operating Plan of the Premises.)

**Note 2**:

Please refer to Paragraph 5 of the Premises Licence (Scotland) Regulations 2007 regarding the format of Layout Plans.

**Note 3**:

The appropriate premises licence (including summary licence, operating plan and layout plan) must be returned to the Licensing Board in order that the licence documents can be updated to reflect the details of the variation. If you are in possession of the appropriate Premises Licence but unable to provide said licence with this application, you must ensure the licence is forward to the Licensing Board within 14 days in order to complete the process of variation.

**Note 4**:

Please note also that once the variation is completed, any certified copies of the appropriate Premises Licence must also be updated to reflect the details of the variation.

**Note 5**:

This refers to an application to Transfer the Premises Licence made under either Section 33(1) or Section 34(1) of the Licensing (Scotland) Act 2005

**Note 6**:

“How we use your information

The information provided by you on this form will be used by Fife Council in order to process your application.  It will be shared with Police Scotland and other Council Services and if appropriate NHS Fife and Scottish Fire and Rescue and information will be obtained from Police Scotland and other Council Services and if appropriate NHS Fife and Scottish Fire and Rescue. Further information on how your information is used and why can be found here: <https://www.fife.gov.uk/kb/docs/articles/privacy-notices/liquor-licence>

The Licensing Board’s Data Protection Officer can be contacted on: [dataprotection@fife.gov.uk](mailto:dataprotection@fife.gov.uk)”.

**Contact Us**/

- 5 -

**Contact Us**:

|  |  |
| --- | --- |
| **Fife Licensing Board,**,  Fife House,  North Street,  GLENROTHES,  Fife.  KY7 5LT. | **Phone:** 03451 55 11 77  **Email:** [liquor.admin@fife.gov.uk](mailto:liquor.admin@fife.gov.uk) |

|  |  |  |
| --- | --- | --- |
| **FOR OFFICE USE ONLY** | | |
| ***Receiver and Receipt No.*** | ***System Updated*** | ***Variation Granted*** |

Appendix 1

**FIFE LICENSING BOARD**

APPLICATION FOR PREMISES LICENCE/PROVISIONAL PREMISES LICENCE\*

\*Delete as appropriate

**Licensing (Scotland) Act 2005, section 20**

**APPLICANT INFORMATION** *Licensing (Scotland) Act 2005, section 20(1)*

**Question 1**

*Name, address and postcode of premises to be licensed.*

|  |
| --- |
|  |

**Question 2**

*Particulars of applicant*

*2(a) Where applicant is an individual, provide full name, date and place of birth, and home address including postcode.*

|  |
| --- |
|  |

*2(b) Where applicant is a partnership, please provide full name, and postal address of partnership.*

|  |
| --- |
|  |

*2(c) Where applicant is a company, please provide name, registered office and company registration number.*

|  |
| --- |
|  |

*2(d) Where the applicant is a club or other body, please provide full name, and postal address of club or other body.*

|  |
| --- |
|  |

*2(e) Where applicant is a partnership, company, club or other body, please provide the names, dates and places of birth, and home addresses of connected persons.\**

|  |
| --- |
|  |

**\* Connected person is defined in section 147(3) of the Licensing (Scotland) Act 2005.**

**Question 3**

*Previous applications*

*3 Has the applicant been refused a premises licence under section 23 of the Licensing (Scotland) Act 2005 in respect of the same premises? YES/NO\**

*If YES – provide full details*

|  |
| --- |
|  |

**Question 4**

*Previous convictions*

|  |  |
| --- | --- |
| *4 Has the applicant or any connected person ever been convicted of a relevant or foreign offence* ([[1]](#footnote-1)) | *YES/NO\** |

*\*If YES – provide full details*

*For the purpose of this Act, a conviction for a relevant offence or foreign offence is to be disregarded if it is spent for the purpose of the Rehabilitation of Offenders Act 1974*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Name & position (if applicable)* | *Date of conviction or sentence* | *Court* | *Offence* | *Penalty* |
|  |  |  |  |  |

**DESCRIPTION OF PREMISES** *Licensing (Scotland) Act 2005, section 20(2)(a)*

**Question 5**

5 *Description of premises (where application is submitted by a members’ club, please also complete question 6)*

|  |
| --- |
|  |

**Question 6**

6 *To be completed by members’ clubs only*

|  |  |
| --- | --- |
| *Do the club’s constitution and rules conform to the requirements of regulation 2 of the Licensing (Clubs) (Scotland) Regulations 2007?* | *YES/NO\** |
| *\* Delete as appropriate* |  |

**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 …………………………………… \* (see note below)

Date …………………………………………

Capacity ……………………………………. APPLICANT/AGENT (delete as appropriate)

Telephone number and email address of signatory ……………………

|  |  |
| --- | --- |
| ***I have enclosed the relevant documents with this application – please tick the relevant boxes*** | |
| *Operating plan* |  |
| *Layout plan* |  |
| *Planning certificate* |  |
| *Building standards certificate* |  |
| *Food hygiene certificate* |  |

\* “How we use your information

The information provided by you on this form will be used by Fife Council in order to process your application.  It will be shared with Police Scotland and other Council Services and if appropriate NHS Fife and Scottish Fire and Rescue and information will be obtained from Police Scotland and other Council Services and if appropriate NHS Fife and Scottish Fire and Rescue. Further information on how your information is used and why can be found here:

<https://www.fife.gov.uk/kb/docs/articles/privacy-notices/liquor-licence>.

The Licensing Board’s Data Protection Officer can be contacted on: [dataprotection@fife.gov.uk](mailto:dataprotection@fife.gov.uk)”.

|  |  |
| --- | --- |
| **For use by the Licensing Board only**  **Application checklist** | |
| **Date received** |  |
| **Fee amount** |  |
| **Receipt number** |  |
| **Received by (*INITIALS*)** |  |
| **Consideration date** |  |
| **Last date for consideration** |  |
| **Date of initial hearing** |  |
| **Date of any modification hearing** |  |
| **Date granted/refused**  **(delete as appropriate)** |  |

|  |  |
| --- | --- |
| **For use by the Licensing Board only**  **If application is for a premises licence**  **Documents required** | |
| **Operating plan** |  |
| **Layout plan** |  |
| **Planning certificate** |  |
| **Building standards certificate** |  |
| **Food hygiene certificate** |  |

|  |  |
| --- | --- |
| **For use by the Licensing Board only**  **If application is for a provisional premises licence**  **Documents required** | |
| **Provisional planning certificate** |  |
| **Operating plan** |  |
| **Layout plan** |  |

Appendix 2

**FIFE LICENSING BOARD**

**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?* | *YES/NO\** |
| *1(b) Will alcohol be sold for consumption solely OFF the premises?* | *YES/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 hour*** |
| *Monday* |  |  |
| *Tuesday* |  |  |
| *Wednesday* |  |  |
| *Thursday* |  |  |
| *Friday* |  |  |
| *Saturday* |  |  |
| *Sunday* |  |  |

**Question 3**

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

|  |  |  |
| --- | --- | --- |
| ***Day*** | ***OFF Consumption*** | |
|  | ***Opening time*** | ***Terminal hour*** |
| *Monday* |  |  |
| *Tuesday* |  |  |
| *Wednesday* |  |  |
| *Thursday* |  |  |
| *Friday* |  |  |
| *Saturday* |  |  |
| *Sunday* |  |  |

**Question 4**

*SEASONAL VARIATIONS*

|  |  |
| --- | --- |
| *Does the applicant intend to operate according to seasonal demand* | *YES/NO\** |

*\*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* |  | N/A | N/A |
| *Conference facilities* |  |  |  |
| *Restaurant facilities* |  |  |  |
| *Bar meals* |  |  |  |
|  |  |  |  |
| ***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.* |  |  |  |
| *Club or other group meetings etc.* |  |  |  |
|  |  |  |  |
| ***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)*** |  |  |  |
| *Live performances –* ***see 5(g)*** |  |  |  |
| *Dance facilities* |  |  |  |
| *Theatre* |  |  |  |
| *Films* |  |  |  |
| *Gaming* |  |  |  |
| *Indoor/outdoor sports* |  |  |  |
| *Televised sport* |  |  |  |
| ***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* |  |  |  |
|  |  |  |  |
| ***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* |  |  |  |

*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.*

|  |
| --- |
|  |

*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/NO\** |

|  |  |
| --- | --- |
| *When fully occupied, are there likely to be more customers standing than seated?* | *YES/NO\** |
| *\*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* | *YES/NO\** |
|  | *\*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* |  |

|  |
| --- |
|  |

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

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

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

**Question 7**

*CAPACITY OF PREMISES*

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

|  |
| --- |
|  |

**Question 8**

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

*Personal details*

*8(a) Name*

|  |
| --- |
|  |

*8(b) Date of birth*

|  |
| --- |
|  |

*8(c) Contact address*

|  |
| --- |
|  |

*8(d) Email address*

|  |
| --- |
|  |

*8(e) Personal licence*

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

**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)

Date …………………………………………

Capacity ……………………………………. APPLICANT/AGENT (delete as appropriate).

Telephone number and email address of signatory ………………

\* “How we use your information

The information provided by you on this form will be used by Fife Council in order to process your application.  It will be shared with Police Scotland and other Council Services and if appropriate NHS Fife and Scottish Fire and Rescue and information will be obtained from Police Scotland and other Council Services and if appropriate NHS Fife and Scottish Fire and Rescue. Further information on how your information is used and why can be found here:

<https://www.fife.gov.uk/kb/docs/articles/privacy-notices/liquor-licence>

The Licensing Board’s Data Protection Officer can be contacted on: [dataprotection@fife.gov.uk](mailto:dataprotection@fife.gov.uk)”.

**Guidance Note**

When completing an application for a Major Variation if there are any amendments which relate to the Premises Licence (e.g. description of premises) details then complete Appendix 1 & 2 of the document.

If the change only applies to the Operating Plan then complete Appendix 2 only.

1. () In addition to any convictions held by the applicant at the time of application, 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 beginning with the making of the premises licence application and ending with determination of the application. [↑](#footnote-ref-1)