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HIGHLAND LICENSING BOARD
Licensing (Scotland) Act 2005, section 46
Application for Confirmation of a Provisional
Premises Licence

APPLICANT INFORMATION

Question 1

Name, address, including postcode of premises in respect of which the Provisional Premises Licence is held:

Question 2

Particulars of applicant:

Name, address, including postcode, email address, mobile and telephone numbers of applicant.

Question 3

Date of issue of Provisional Premises Licence:

Question 4

4 (a) Please state when it is intended that the premises are to open to the public

Question 5

Details of Premises Manager:

5(a) Name

5 (b) Date of birth

5 (c) Contact address

5(d) E-mail address and telephone number

5(e) Personal licence

Expiry Date	Name of issuing Licensing Board	Personal Licence No.

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICANT

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

I hereby confirm that since the provisional premises licence was issued, or if, since that time, an application for a variation of the licence has been granted under section 30, since the last such application was granted:

- that there has been no variation (other than a minor variation) made to the operating plan or layout plan for the premises to which the licence relates.

I further confirm that the contents of this Application are true to the best of my knowledge and belief.

Signature: Print Name:

Capacity: APPLICANT/AGENT (delete as appropriate)

Date:

Telephone number and email address of signatory:

Telephone No:	
E-mail Address:	

Postal Address of Agent (if appropriate)

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.

APPLICATION CHECKLIST:				
I have enclosed the relevant documents with this application – please tick the relevant boxes				
(i) Application Fee : Grant of Premises Licence Category Fee as undernoted, less £200 initially paid for Provisional Premises Licence:- (Please note that the Council can no longer accept payment of applications by cheque or cash). See ways to pay below.				
Premises Licence Category	Rateable Value of Premises		Application Fee	Please tick
1	<ul style="list-style-type: none"> • Premises rated at nil or not shown in the valuation roll • Visitor Attractions • Clubs • Private Accommodation 		£200	
2	£1 -	£11,500	£800	
3	£11,501	£35,000	£1,100	
4	£35,501	£70,000	£1,300	
5	£70,001	£140,000	£1,700	
6	£140,001	And above	£2,000	
(ii) \ ...				
(ii) Provisional Premises Licence including the Operating Plan, Layout Plan and Summary				

(iii) Section 50 - Planning Certificate	
(iv) Section 50 - Building Standards Certificate	
(v) Section 50 - Food Hygiene Certificate	

1. Submission of Application

Completed applications should be sent to the Clerk's office in the area where you normally reside:

HIGHLAND LICENSING BOARD CONTACT ADDRESSES AND PAYMENT DETAILS

Clerk to the Board	Inverness, Nairn, Badenoch and Strathspey areas	Lochaber
Claire McArthur Highland Licensing Board Council Offices High Street Dingwall IV15 9QN Tel: (01349) 868541 claire.mcarthur@highland.gov.uk	Highland Licensing Board Highland Council Headquarters Glenurquhart Road Inverness IV3 5NX Tel: (01463) 785087 licensing@highland.gov.uk	Highland Licensing Board Council Offices Charles Kennedy Building Achintore Road Fort William PH33 6RQ Tel: (01397) 707233 licensing@highland.gov.uk
Caithness and Ross areas	Sutherland	Skye and Lochalsh
Highland Licensing Board Caithness House Market Place Wick KW1 4AB Tel: (01955) 608214 licensing@highland.gov.uk	Highland Licensing Board Council Offices Drummuie Golspie KW10 6TA Tel: (01408) 635205 licensing@highland.gov.uk	Highland Licensing Board Council Offices Tigh na Sgìre Park Lane Portree, IV51 9GP Tel: (01478) 613824 licensing@highland.gov.uk

If you wish any additional guidance or advice, please contact your **Licensing Standards Officer** in your area:

LICENSING AREA	LSO	CONTACT DETAILS
SOUTH Inverness, Nairn, Badenoch & Strathspey	Shonnie Campbell	Tel: 01463 702259 E-mail: shonnie.campbell@highland.gov.uk
NORTH Caithness, Sutherland and Ross	Garry Cameron	Tel: 01408 635217 E-mail: garry.cameron@highland.gov.uk
WEST Skye and Lochalsh and Lochaber	Chris MacKinnon	Tel: 07760 703222 E-mail: ewenchristopher.mackinnon@highland.gov.uk

WAYS TO PAY:

By Debit or Credit Card

- In Person at any Service Point
- By Telephone to a member of Council staff. Please telephone the payment line on 01349 886605/09 and a member of staff will be able to take your payment. This service is available Monday-Friday 8 am to 5 pm,

By Bank Credit Transfer, Telephone or Online Banking or Standing Order

Please pay to the: Virgin Bank, 15 Academy Street, Inverness, IV1 1JN
Bank Sort Code: 82:70:13
Bank Account Number: 30000542
Please quote: Name of Premises/Type of Application or Invoice Number with all payments.

EQUAL OPPORTUNITIES MONITORING FORM QUESTIONS

Introduction to Equalities Form:

In order to check the effectiveness of our equal opportunities policy we monitor a range of areas where people may experience discrimination. We would be pleased if you would complete the form below. The information you give will not be available to people involved in the application process and will be used for monitoring purposes only. All information will be treated in strict confidence and no names will be shown in any statistics produced.

Data Protection Act 1998

Information you provide in this form will be processed fairly and lawfully for the following purposes:

- For administrative purposes, reporting, monitoring data and using information as statistical data for strategic planning.
- For equal opportunities monitoring.

Question 1: Gender Identity - 1

How would you describe your gender?

Female

Male

Prefer not to answer

Question 2: Gender Identity - 2

Have you ever identified as a transgender person or trans person?

(For the purpose of this question “transgender” is defined as an individual who lives, or wants to live, full time in the gender opposite to that they were assigned at birth)

Yes

No

Prefer not to answer

Question 3: Age

Please tick one box:-

18-24

25-34

35-44

45-54

55-64

65-74

75+

Prefer not to answer

Question 4: Religion or Belief

What is your Religion or Belief?

Buddhist	
Church of Scotland	
Hindu	
Humanist	
Jewish	
Muslim	
None	
Other Christian	
Sikh	
Pagan	
Roman Catholic	
Prefer not to answer	
Other Religion or Belief, please specify (FREE TEXT):	

Question 5: Ethnic Group

What is your ethnic group? Choose one from section A to F

A. White	
Scottish	
Other British	
Irish	
Gypsy/Traveller	
Polish	
Other white ethnic group	

B. Mixed or Multiple Ethnic Group	
Any mixed or multiple ethnic groups	

C. Asian, Asian Scottish or Asian British	
Pakistani, Pakistani Scottish or Pakistani British	
Indian, Indian Scottish or Indian British	
Bangladeshi, Bangladeshi Scottish or Bangladeshi British	
Chinese, Chinese Scottish or Chinese British	
Other	

D. African	
African, African Scottish or African British	
Other	

E. Caribbean or Black

Caribbean, Caribbean Scottish or Caribbean British

Black, Black Scottish or Black British

Other

F. African

Arab, Arab Scottish or Arab British

Other

Prefer not to answer

Other, please specify (FREE TEXT)

Question 6a: Disability

Under the terms of the Equality Act 2010, a disability is defined as a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out day-to-day tasks.

Do you consider that you have a disability?

Yes

No

Prefer not to answer

Question 6b: Disability (Impairment)

If yes to the above question, please state the type of impairment which applies to you. If none of the categories apply, please mark 'Other' and specify the type of impairment.

Deafness or partial hearing loss

Blindness or partial sight loss

Learning disability for example, Down's Syndrome

Learning difficulty for example, dyslexia

Developmental disorder for example, Autistic Spectrum Disorder or Asperger's Syndrome

Physical disability

Mental health condition

Long-term illness, disease or condition

Prefer not to answer

Question 7: Sexual Orientation

What is your sexual orientation?

Bisexual

Gay

Heterosexual/Straight

Lesbian
