

This application must be accompanied by the appropriate fee and lodged with:

Licensing Section
The City Of Edinburgh Council
249 High Street, Edinburgh EH1 1YJ

T: 0131 529 3223 / 4208 F: 0131 529 4207

Office Hours:

Mon, Wed, Thu: 0830 – 1630
Tue: 1000 - 1630
Fri: 0830 – 1500

www.edinburgh.gov.uk/licensing

OFFICIAL USE ONLY Record of Application	
DATE	
TILL NO.	
RECEIPT NO.	
INITIALS	
FEE	

APPLICATION FOR OCCASIONAL LICENCE

Before completing this form please read the guidance notes at the end of the form.

If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written or typed in black ink. Use additional sheets, if necessary.

You may wish to keep a copy of the completed form for your records.

1. LICENCE DETAILS (see note 1)
Premises licence number (if applicable)
Personal licence number (if applicable)
Name of voluntary organisation (if applicable)

2. PERSONAL DETAILS			
TITLE (delete as appropriate): Mr Mrs Miss Ms Other (please state)			
Surname			
Forenames			
DATE OF BIRTH	Day	Month	Year
ADDRESS WHERE ORDINARILY RESIDENT TO BE USED FOR CORRESPONDENCE PURPOSES			
Post town	Post code		
TELEPHONE NUMBERS			
Daytime			
Evening			

Mobile	
FAX NUMBER	
E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail)	
3. THE PREMISES	
Description of premises	
Description of activities to be carried on in the premises	
Full postal address of premises which this application refers to	

4. DURATION OF LICENCE
From:
To:

5. Is alcohol to be sold on & off the premises YES/NO* - Provide relevant details as to hours requested when alcohol will be sold on/off the premises-* delete as appropriate	
Times for sale of alcohol for consumption on premises	Times for sale of alcohol for consumption off premises
Statement of the times at which any activities other than the sale of alcohol will be carried on in the premises	

6. CHILDREN (see note 2)	
This section must be completed where alcohol is for sale for consumption on the premises	
Are children or young persons permitted entry? YES/NO (if answered yes the remainder of this section must be completed)	
Ages of children or young persons permitted entry	Times at which children or young persons permitted entry
Parts of premises to which children or young persons permitted entry	

7. CHECKLIST	
Please tick yes/no	
<ul style="list-style-type: none"> I have made or enclosed payment of the fee for the application 	YES/NO

8. Signature and declaration by applicant (see note 3)

DECLARATION

IT IS AN OFFENCE TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

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

SIGNATURE		DATE	
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NOTES

1. Section 56 of the Licensing (Scotland) Act provides that only:-

- The holder of a premises licence;
- The holder of a personal licence; or
- A representative of any voluntary organisation

is eligible to apply for an occasional licence

2. Where alcohol is to be sold for consumption on the premises, the Act requires that a clear statement be made as to whether children or young persons are to be allowed entry and, if they are, a statement of the terms on which they are allowed entry

3. Data Protection Act 1998

- The information on this form may be held on an electronic register which may be available to members of the public on request

4. Information on the Licensing (Scotland) Act 2005 is available on the website of the Scottish Parliament (<http://www.opsi.gov.uk/legislation/scotland/acts2005/20050016.htm>)

Outdoor Area Occupation Permit Application Form

PART 1.- LICENCE DETAILS	
Premises licence number (if applicable)	
Personal licence number (if applicable)	
Name of voluntary organisation (if applicable)	

PART 2 – APPLICANT DETAILS – <i>all question must be completed; your application form cannot be accepted unless every question has been completed. If not applicable, please enter N/A</i>			
	Title	<i>(i.e. Dr, Mr, Mrs, Ms etc)</i>	
	Forename Names		
	Surname		
	Business or Company Name (if applicable)		
Contact Address			
	House name		
	Street number	Flat no	
	Street name		
	Postcode		
	Contact Phone No		
	Mobile Phone No		
	Contact email address		
	Date of Birth	Place of birth	

PART 3 - PREMISES DETAILS	
Premises name	
Street number	
Street name	
Postcode	
Premises contact phone no	
email Address	

PART 4 – PROPOSED AREA OF OCCUPATION – Please provide a clear, Ordnance Survey based plan outlining the proposed area for tables and chairs in **red**, and the premises boundary in **blue**.

A detailed site plan showing the precise location and proposed setting out of the tables and chairs. Once the Permit is agreed this must be adhered to.

Provide dimension details of the area/s your tables and chairs will occupy - multiply the length by breadth to find the area (i.e. L x B)

	Length (L)	Breadth (B)	Area (m ²)
area 1			
area 2			
area 3			
area 4			
area 5			
Total area (in m ²) of occupation			

Please tick ✓

Has a building survey been carried out within the last 12 months	YES
	NO* <i>* if no, a risk assessment must be carried out</i>

PART 5 – DURATION - Please tell us what days and times you wish to put tables and chairs out (For example: *Monday to Friday 9am to 5pm, Saturday and Sunday 10am to 4pm*)

Note - standard operating hours outwith the Grassmarket area are from 9am – 9pm daily. You can apply for an extension to operate until 10pm.

standard operating hours within the Grassmarket area are from 12noon – 9pm daily. You cannot request an extension to operate until 10pm within the Grassmarket area (see guidance notes)

Start Date	End Date
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Days and Times (in 24hr format) – note standard operating hours are 9am to 9pm daily

	From	until
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

PART 6 – PROPOSED NUMBER OF TABLES AND CHAIRS - Please see guidance note for details of what is acceptable

Number of tables			
Number of chairs			
Additional equipment within the tables and chairs area – please provide details			
Parasols	No	Yes*	* If Yes, please provide details below

PART 7 – BARRIERS - describe the type of barriers you intend to use. Please see guidance note for details of what is acceptable. **Note** if these are not provided your application will be refused

description	

CHECKLIST

The checklist must be fully completed in order to submit your application.

I have provided the following - please tick ✓

Completed application form		
Where a shortened consideration period is requested - reasons for the reduced timescales are attached		
The relevant application fee		<i>See guidance notes for fees</i>
A site plan indicating proposed area of occupation – <i>must include dimensions and dimensions of remaining footway</i>		Note: <i>(if 3m unobstructed footway is not available for pedestrians to get passed the application will be refused)</i>
A Layout diagram showing exact positions of tables and chairs		
A fully completed wind management plan		
Confirmation that the current public liability insurance is sufficient to cover the outside area where the tables and chairs are being placed		
Confirmation that a site notice is currently being displayed and will remain in place for 14 days		

Signature of Applicant /Agent <i>(delete as appropriate)</i>	Date
Print Name:	

CORRESPONDENCE DETAILS – *please provide details of where all correspondence relating to this application should be sent*

Name	
Address	
Postcode	
contact phone no	
email address	

Table and Chairs Consent Wind Management Plan Template & Related Info

Nominated person(s) :-

*
*
*
*

Contact telephone numbers

Land – () Mobile - ()

Weather conditions

Weather forecast from the following websites or information sources have been checked prior to trading:

*
*
*
*
*

Prior to Trading

Compare the predicted wind strengths (from information sources) against the operational wind speed limits of the temporary structure(s), this should include canopies, parasols, screens, etc.
If the wind speeds are forecast to be higher than operational limits, then trading or use of the structures may have to be curtailed / cancelled.

Day of Trading

Structures should be weighed down with ballast/weights relative to the predicted wind gust speed. This information can be either supplied by the manufacturer or by an engineer.
To ensure that any structures are dismantled in good time if the weather begins to worsen and to avoid any accidents, a maximum wind speed should be set. If the wind picks up to 75% of that speed, the structures should start to be dismantled before the wind becomes too strong to do this safely.

Maximum wind speed is * _____

*Use the wind speed specified by manufacturer or by engineer

Therefore, 75% of maximum windspeed is ** _____

**Choose a wind speed at which trading / use of structures will cease.

These wind speeds can be expressed using any unit of measurement, however a Beaufort Wind Scale is attached for reference.

NB: The chosen wind speed must be consistent with the information above

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Beaufort Wind Scale

**Developed in 1805 by Sir Francis Beaufort of
England**

Force	Wind (mph)	WMO Classification	Appearance of Wind Effects	
			On the Water	On Land
0	Less than 1	Calm	Sea surface smooth and mirror-like	Calm, smoke rises vertically
1	1-3	Light Air	Scaly ripples, no foam crests	Smoke drift indicates wind direction, still wind vanes
2	4-7	Light Breeze	Small wavelets, crests glassy, no breaking	Wind felt on face, leaves rustle, vanes begin to move
3	8-12	Gentle Breeze	Large wavelets, crests begin to break, scattered whitecaps	Leaves and small twigs constantly moving, light flags extended
4	13-18	Moderate Breeze	Small waves 1-4 ft. becoming longer, numerous whitecaps	Dust, leaves, and loose paper lifted, small tree branches move
5	19-24	Fresh Breeze	Moderate waves 4-8 ft taking longer form, many whitecaps, some spray	Small trees in leaf begin to sway
6	25-31	Strong Breeze	Larger waves 8-13 ft, whitecaps common, more spray	Larger tree branches moving, whistling in wires
7	32-38	Near Gale	Sea heaps up, waves 13-20 ft, white foam streaks off breakers	Whole trees moving, resistance felt walking against wind
8	39-46	Gale	Moderately high (13-20 ft) waves of greater length, edges of crests begin to break into spindrift, foam blown in streaks	Whole trees in motion, resistance felt walking against wind
9	47-54	Strong Gale	High waves (20 ft), sea begins to roll, dense streaks of foam, spray may reduce visibility	Slight structural damage occurs, slate blows off roofs
10	55-63	Storm	Very high waves (20-30 ft) with overhanging crests, sea white with densely blown foam, heavy rolling, lowered visibility	Seldom experienced on land, trees broken or uprooted, "considerable structural damage"
11	64-72	Violent Storm	Exceptionally high (30-45 ft) waves, foam patches cover sea, visibility more reduced	Large trees uprooted
12	73+	Hurricane	Air filled with foam, waves over 45 ft, sea completely white with driving spray, visibility greatly reduced	Widespread damage occurs

TABLES AND CHAIRS CONSENT NOTICE OF APPLICATION

Roads (Scotland) Act 1984 Section 59

SITE NOTICE NOTICEIS HEREBYGIVEN THAT

Full Name of applicant or Company / Partnership			
Address of Premises			
		Postcode	

Has applied to the City of Edinburgh Council (CEC) for the Grant / Renewal of a Tables and Chairs Permit

To operate between: _____ and _____

The hours of operation will be **0900hrs to 2100hrs, 7 days per Week**

An extension to the above hours **has/ has not** been requested until **2200hrs**

Any objection relating to this application should be addressed to:

**Business Services/ Transport Managers
Place
Transport
Business Centre G4, Waverley Court, 4 East Market
Street, Edinburgh, EH8 8BG**

Objections must be lodged within **14 days** of the date application was lodged with CEC Date ___ / ___ / ___

Objections must be in writing and must specify the grounds of the concern(s), the name and address of the person making it and must be signed by that person or their agent.

This site notice must be displayed prominently in a position clearly visible to the public and within a 20 metre radius of the above premises.

This site notice must be displayed for a period of **14 days** from the date of application was lodged with the City of Edinburgh Council

Applicant's Signature		Date	/ /
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