

PERTH AND KINROSS LICENSING BOARD,

Pullar House, 35 Kinnoull Street, Perth, PH1 5GD

SCHEDULE 6

Regulation 7

DISABLED ACCESS AND FACILITIES STATEMENT

Licensing (Scotland) Act 2005, section 20(2)(b)(iia)

Question 1

Disabled access and facilities

1(a)	Is there disabled access to the premises	YES
1(b)	Do you have facilities for those with a disability	YES
1(c)	Do you have any other provisions available to aid the use of the premises by disabled people	YES
*Delete as a	appropriate	

If you have answered Yes to any of the questions above please complete, as appropriate, the following sections.

Question 2

Disabled access to, from and within the premises

Please provide clear and detailed description of how accessible the premises are for disabled people. e.g. ramps, accessible floors, signage.

The installation of the Orangery event space has opened up this listed building. Double doors from a paved courtyard allow level accessible access. Two allocated disabled car parking spaces are also available within the car park.

If desired a foldable ramp is also available for entry to the main door. This is a listed building and therefore this was the best solution within the grading and creating the new wider opening entrance directly to ground floor at The Orangery entrance.

Questi	on 3
Faciliti	es available
	describe in detail the facilities provided for disabled people. e.g. disabled toilets, lifts, ble tables.
ground facilities	s within the event space are freestanding and accessible. Toilet facilities are available or and also where there is a larger event further toilets are hired including disable with ramps. There is also a fully accessible room being constructed in the next phase nent within the stables accommodation.
Questi	on 4
	on 4 provisions

Please provide details of any other provisions made to aid the use of the premises by disabled people. e.g. assistance dogs welcome, large print menus.

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 disabled access and facilities statement are true to the best of my knowledge and belief.			
Signature * (see note below)			
Date			
CapacityAPPLICANT/AGENT			
Telephone number and email address of signatory			
* 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			