

PERTH AND KINROSS LICENSING BOARD,

Pullar House, 35 Kinnoull Street, Perth,

SCHEDULE 6



PH1 5GD

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 / YES |
| 1(b) | Do you have facilities for those with a disability | YES / NO |
| 1(c) | Do you have any other provisions available to aid the use of the premises by disabled people | YES / YES |
| <i>*Delete as appropriate</i> | | |

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.

There is a level entrance to the premises.

Question 3

Facilities available

Please describe in detail the facilities provided for disabled people. e.g. disabled toilets, lifts, accessible tables.

There are no disabled toilets within the premises.

Question 4

Other 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.

Assistance doges are welcome.

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICANT

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

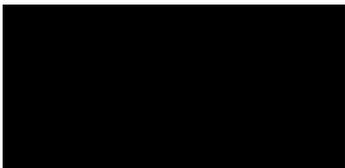


DIRECTOR

3/2/21

The contents of this disabled access and facilities statement are true to the best of my knowledge and belief.

Signature



*(see note below)

3/2/21

Date

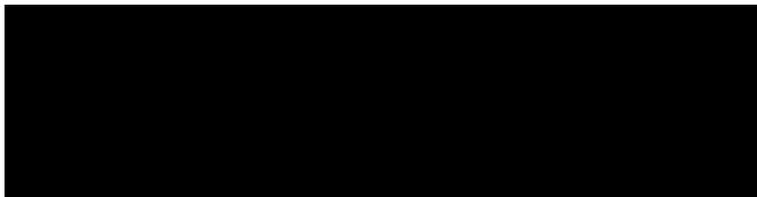
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Capacity

D

APPLICANT/~~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