



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
<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.

RAMPED ACCESS. WITH HANDRAIL, FROM GATED MAIN ENTRANCE TO CLUBHOUSE ENTRANCE DOOR.

ACCESS TO CHANGING ROOMS WITH PAVED PATHWAY.

RAMPED ACCESS ONTO BOWLING GREEN.

ACCESS DOORS TO CLUBHOUSE AND DISABLED TOILET ARE WHEELCHAIR SUITABLE.

Question 3

Facilities available

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

DISABLED TOILET IS WHEELCHAIR ACCESSIBLE AND FITTED WITH HANDRAILS AT TOILET AND SINK AREA.

ALL TABLES WITHIN CLUB ARE SUITABLE FOR WHEELCHAIR USERS.

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 DOGS ARE WELCOME.

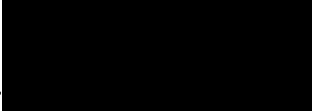
AN APPROPRIATE WHEELCHAIR, SUITABLE FOR USE ON BOWLING GREEN, IS AVAILABLE FOR DISABLED BOWLERS.

A DEFIBULATOR IS AVAILABLE WITHIN THE CLUBHOUSE TO ASSIST WITH EMERGENCY SITUATIONS.

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.....14.05.2025.....

Capacity PRESIDENT.....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