

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	Y23/NO*
1(c)	Do you have any other provisions available to aid the use of the premises by disabled people	TES/NO*

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 AN ACCESS DOOR TO THE SIDE OF THE PREMISES WHICH IS FLAT, LEVEL AND WHEELCHAR SUITABLE.

TREMISES IS FLAT AND LEVEL INTERNALLY WITH TULETS ON THAT SAME LEVEL, AUTHOREM NOT WHIEDLICHAIR FRIENDLY.

NOT WHIEDLICHAIR FRIENDLY.

NO DISABLED ACCESS TO VIPER FLOORS.

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

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.

ASSERVE TOES WELCOME.

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 at and belief	ccess and facilities statement are true to the best of	f my knowledge
Signature	. * (see note below)	
Date 17 APRIL	-2019	
Capacity	APPLICANT/AGENT	
Telephone number and email a	ddress 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