

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.

Included on the granted permissions with works almost complete are a disabled ramp entered from the front of the premises and entering the building from the side allowing all of the ground floor to be accessible. The ramp and access is fully signed and compliant with Building Standards.

Question 3

Facilities available

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

There is a separate compliant disabled toilet to be completed on the ground floor along with all required alarm points and also a wheelchair refuge area in the event of a fire alarm.
There is an assisted en-suite bedroom on the ground floor with a wheelchair access shower.
There will be accessible tables and table service for those requiring assistance.

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.

We have strobe fire alarms for the hard of hearing in certain rooms, an assisted bedroom with en-suite bathroom on the ground floor and assisted dogs are always welcome.
Additional waitress service for those that need it is always available.

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 18/09/19.....

Capacity AGENT

Telephone number and email address of signatory 0141 333 0636 info@mshblicensing.com

*** 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.”