

STREET TRADING CONSENT APPLICATION (REGULAR TRADER)

APPLICANT DETAILS *Please complete / amend as appropriate*

Title:		Home Telephone:	
Forename(s):		Mobile Telephone:	
Surname:		Trading Name:	
Home Address:			
Email:			

BACKGROUND *Please circle / cross out as appropriate*

Have you ever been refused registration or consent to trade in the past, either here or in any other area? <i>(If 'Yes' please provide full details)</i>	Yes / No
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DETAILS OF BUSINESS

I, being the above named applicant, hereby apply for grant / renewal of a street trading consent in respect for the following:-

Products to be sold: <div style="border: 1px solid black; height: 80px; width: 100%;"></div>	Address of Location you wish to trade from (please also submit a plan showing exact location): <div style="border: 1px solid black; height: 100px; width: 100%;"></div>								
If selling food / drink – Name of Local Authority business is registered with for Food Safety	Times you wish to trade								
MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> </table>								

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VEHICLE / STALL DETAILS*Please complete / amend as appropriate*

Will you be trading from a vehicle? Yes / No

IF YES**IF NO**

Vehicle Registration:

Make:

Model:

Description of Stall:

Address where vehicle / stall kept overnight:

ENCLOSURES

I have enclosed the following with my application:

- Public Liability Insurance Certificate
- Plan showing the location I wish to trade in
- Proof of eligibility to work in the UK
- Landowner's consent to trade

DECLARATIONS*Please complete as appropriate*

Data Protection: We may use personal information about you to process your application for a licence and maintain the Council's customer records, to carry out our licensing functions including correspondence and enforcement and/or to prevent or detect crime (including participation in the National Fraud Initiative). For these purposes, we may share your personal information with, and obtain information about you from, other parts of the Council or outside organisations.

I declare I have the vehicle owner's permission to licence this vehicle (where appropriate) and that to the best of my knowledge and belief, the information given above and any other information given in connection with this application is true. If a licence is granted, I undertake to comply with the conditions attached to the licence.

Signed:

Name:
(in CAPITALS)

Date:

NB: IT IS A CRIMINAL OFFENCE TO MAKE, KNOWINGLY OR RECKLESSLY, A FALSE STATEMENT OR OMIT ANY INFORMATION FROM THIS APPLICATION

OFFICE USE ONLY*To be completed by licensing officer only*

Type	Code	Fee	Receipt No	Payment Method
Application Fee	2211 80033	£		

RUSHMOOR BOROUGH COUNCIL, Environmental Health & Housing Services,
Council Offices, Farnborough Road, Farnborough, Hampshire GU14 7JU. Telephone: (01252) 398 399

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