

APPLICATION FOR STREET TRADING CONSENT



WOKINGHAM
BOROUGH COUNCIL

This is an application under the Local Government
(Miscellaneous Provisions) Act 1982

Full Name of Applicant	
Company Name & Full Address	
Date of Birth (Applicants must be over 18 years of age)	
Daytime telephone number (inc. mobile number where applicable)	
Nature of Business (Description of ALL articles to be sold/activities to be carried out)	
Proposed location of Trading Pitch (May be description, ordnance survey grid reference, map with location indicated)	
Are you currently trading at this location?	
Has owner's permission been given?	
Name & Address of owner of site if applicable	
Description & size of stall/vehicle to be used for trading, including registration number (where applicable)	
Address of premises where vehicle/stall normally kept when not trading	
Proposed days and times of trading	
Will you be manning the pitch yourself?	
Assistants: please provide names, addresses & telephone numbers	

Give details of previous street trading experience (including dates and locations)	
Have you ever been refused a licence or consent in any other area? If yes, give details	
Do you have any previous convictions? If yes, list on separate sheet	
Trading name (if any)	
Period of licence required (Max 1 year)	
Do you hold Level 1 Food Hygiene? (Essential for food handlers) - attach copy	
Which local authority are you registered with (as required by the Food Hygiene Regulations)?	

Declaration

The information given on this application is true and correct. I have included all necessary enclosures with this application. I agree to be bound by Wokingham Borough Council's street trading conditions and confirm I have received and read these conditions. I also authorise Wokingham Borough Council to make enquiries to the police or any other appropriate persons about this application subject to the Provisions of the Rehabilitation of Offenders Act 1974 as amended. I understand it is an offence to carry on the business of street trading without being granted a consent.

Signed Date

Name (Block Caps) Position in Company

Completed form to be returned to:

Email: licensing@wokingham.gov.uk

Licensing, Wokingham Borough Council, Civic Offices, Shute End, Wokingham RG40 1BN
Phone 0118 974 6000

Fees

For fees and payment methods please see the licensing page on the council's website www.wokingham.gov.uk

Enclosures Required to Accompany Your Application

Location Plan

Copy of Food Hygiene Certificate

2 colour passport sized photographs of yourself & any assistants

Copy of planning permission (land other than highway)

Copy of permission of landowner (land other than highway)

Copy of Certificate of Insurance for public liability

Gas Safety Certificate

Fire Extinguisher Certificate