

## APPLICATION FOR STREET TRADING CONSENT

## **COMMERCIAL TRADERS**

- 1. Your application must be submitted at least 30 days before you wish to start trading.
- 2. The application form must be properly completed and sent with all the appropriate documents. If you do not do so the issue of your consent will be delayed.
- 3. Your payment must accompany this form. The fees are set out on our website at <u>www.watford.gov.uk/streettrading</u>.
- 4. The Council can refuse to grant your application or take away permission at any time. Before we do that, we will write and tell you why. You will have the chance to tell us about anything then which may make us change our mind. Should you wish to appeal against any decision made, you must do so, in writing, within 5 working days addressing your appeal to the Head of Community and Environmental Services.
- 5. Consent will not be granted if:
  - the proposed site is unsafe
  - is likely to cause nuisance to others
  - we are not satisfied about the health, safety, hygiene or welfare of the trader or the customers
  - creates unfair direct competition to existing businesses
  - arrears are due to the Council for previous consents
  - proven complaints have been made against you in connection with previous consents
  - we have not been able to inspect your stall/mobile unit
  - any other reasonable cause.
- 6. <u>PLEASE ATTACH</u>:
  - your health and safety policy if your company employs more than five people
  - a current public liability insurance showing at least £5 million cover
  - if a food trader, a copy of your basic food hygiene training certificate and food registration certificate from your local authority
  - two current passport-size photographs of the applicant
- 7. Answer **ALL** questions. If there is insufficient space please continue on a separate sheet of paper.

## DATA PROTECTION – Keeping your personal information safe

Any data that you provide will be stored and processed by Watford Borough Council or its appointed agents in accordance with the law.

Information collected may be shared with other Council departments and/or organisations the Council works with who assist us in the performance of our functions. It may also be shared with outside organisations such as the Police, DWP, and County Council, to prevent and detect crime. It may be shared with insurance companies and bodies responsible for auditing or administering public funds for the prevention and detection of fraud.

Further information on the Council's obligations to safeguard your personal information and your rights on accessing data held about you can be found on the Council's website at:

<u>https://www.watford.gov.uk/privacynotice</u> and <u>https://www.watford.gov.uk/ehlprivacynotice</u> or by telephoning 01923 278000

FULL NAME(S) OF APPLICANT(S)	
TOLE MANIE(3) OF AFFEICANT(3)	
DATE OF BIRTH	NATIONAL INSURANCE NUMBER
COMPANY NAME(S)	
POSITION	
ADDRESS (inc postcode)	
TELEPHONE	EMAIL
By ticking this box, you agree to us mainly co	ommunicating with you by email, including sending
reminder letters and licences.	
PLEASE TICK IF YOU ARE APPLYING FOR	
12 MONTHS starting from	until
SHORT TERM starting from	until
PLEASE INDICATE THE DAYS AND TIMES OF THE WEEK YOU WISH TO TRADE	
PLEASE STATE THE EXACT SITE WHERE YOU WISH TO TRADE	
HAVE YOU PREVIOUSLY TRADED FROM THIS SITE	YES / NO
If YES please state dates from and to:	
DESCRIPTION OF GOODS TO BE SOLD	
DESCRIPTION OF STALL FROM WHICH GOODS WILL BE SOLD	
If trading from a mobile stall (such as a trailer or vehicle)	
Make:	
Model:	
Colour:	
Registration number	
WHO WILL BE OPERATING THE STALL (FULL NAMES A	AND ADDRESSES)
Lunderstand that if I make any false statement or emit any material particular in this application taxy. Its Patha	
I understand that if I make any false statement or omit any material particular in this application I may be liable	
to prosecution. I understand that the information on this form may be used in connection with the	
administration of Council Tax, and may also be used by other Council departments, the Department of Social Security and other public bodies for the prevention of fraud. I also declare that I have permission to work in the	
	•
	an offence if I do not hold such permission or should this
permission lapse or be withdrawn.	
DATE: SIGNED:	

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