## Annex E



## Cotswold Application for a street trading licence or consent Local Government (Miscellaneous Provisions) Act

For help contact <u>ers@cotswold.gov.uk</u> Telephone: 01285 623000

\* required information

Section 1 of 11				
You can save the form at any time and resume it later. You do not need to be logged in when you resume.				
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.		
Your reference	The Gateway Centre	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.		
Are you an agent acting on behalf of the applicant?  Yes  No		Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.		
		Welkiel.		
Applicant Details				
First name	Adam			
Family name	Guppy			
E-mail address				
Main telephone number		Include country code.		
Other telephone number				
☐ Indicate here if you w	ould prefer not to be contacted by telephone			
Are you:				
<ul> <li>Applying as a business or organisation, including as a sole trader</li> </ul>		A sole trader is a business owned by one		
Applying as an individual		person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.		

Continued from previous page		
Your Address		Address official correspondence should be
Building number or name		sent to.
Street		
District		
City or town		
County or administrative area		
Postcode		
Country		
Section 2 of 11		
FURTHER DETAILS ABOUT TI	HE APPLICANT	
Former name(s)		If currently or previously known by any other name(s), you must record them here.
Home Address		
Is the address the same as (or	similar to) the address given in section one?	If "Yes" is selected you can re-use the details
<ul><li>Yes</li></ul>	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
Building number or name		
Street		
District		
City or town		
County or administrative area		
Postcode		
Country		
Further Details		
Date of birth	dd mm yyyy	
Place of birth		
National Insurance number		
Section 3 of 11		
DIRECTORS, PARTNERS, OW	NERS AND MANAGERS	

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is a partnership), OFFICE BEAR	I COMPANY DIRECTORS and the SECRETARY (if the applicant is a company), all PARTNERS (if it ERS (if it it ERS (if it it is a club or association), all OWNERS of the business or premises and all MANAGERS of ncluding day-to-day MANAGERS OF THE PREMISES. Check for local guidance notes and exact requirements.
Are there any such people for	whom you need to provide details?
○ Yes	<ul><li>No</li></ul>
Section 4 of 11	
TYPE OF APPLICATION	
Type of application:	New
Specify the period for which the licence is required (if applicable)	12 months
Section 5 of 11	
APPLICATION DETAILS	
_	s and conditions before completing this section. Some of the questions may not be relevant responses may have to provide very specific information
Type of application?	
<ul> <li>Street trading licence</li> </ul>	Street trading consent
Trading name	The Gateway Centre
What You Want To Trade	
List all the goods and services	you want to offer for sale
	p up stalls in the locations as specified on the plan. There may also be stalls selling other
goods, for example Christmas	
Does this include selling food	or drink?
<ul><li>Yes</li></ul>	○ No
Are you registered as a food b	usiness?
<ul><li>Yes</li></ul>	○ No
Local authority where you are registered	Cotswold District Council
Registration number	https://ratings.food.gov.uk/business/en- GB/9409/RelishGateway-Centre-Spine- Road
Where will goods be stored w	hen not on sale?
1 1	ided by external contractors. We will ensure that we obtain a copy of their food registration e. Each business will be responsible for the storage of their food produce.
	22 22 22 responsible for the storage of their lood produce.
When You Want To Trade	

Continued from previous page	
Proposed trading times for ea	ch day of the week (if applicable)
Day or days	Every day
From	10:00
То	23:00
	Add another day
Where You Want To Trade	
Type of trading	
○ Mobile	
<ul><li>Stationary</li></ul>	
Street(s) / location(s) where yo	ou wish to trade
The gateway centre - see plan	for fixed locations on site
Section 6 of 11	
DETAILS OF VEHICLE, STALL	AND/OR CONTAINER
Will you be using a vehicle in c	onnection with your work as a trader?
○ Yes	<ul><li>No</li></ul>
Description of unit from which	you intend to trade, including dimensions
May do - may have a trader wi	th a vehicle or in a pop up stall
Where will the unit be stored w	/hen not in use?
On site/be taken away	
Continue 7 of 11	
Section 7 of 11  PUBLIC LIABILITY INSURANCE	E
	of public liability insurance to cover this activity – check local requirements.
Do you have public liability in:	
Yes	○ No
	, No
Provide details of the policy	
Insurance company	
Policy number	
Period of cover	
Amount of cover (£m)	

Continued from previous page		
Section 8 of 11		
PREVIOUS APPLICATIONS		
Have you, or any person name (check all that apply)	ed in or associated with this application, previously applied for a similar licence or registration?	
□ No	Yes - application granted and revoked	
	Yes - application refused	
Application Granted		
Only provide details about the	e most recent application – unless stated otherwise in local guidance notes.	
Local authority applied to	Cotswold District Council	
Date of licence/registration	04/12/2020	
Reference number	C/20/00786/STC	
Expiry date	31/12/2020	
	Add another granted section	
Section 9 of 11		
CONVICTIONS		
	ed in or associated with this application, been convicted of any crime or offence?	
O Yes	• No	
Section 10 of 11		
ADDITIONAL DETAILS		
	ation which is required or relevant to your application (check for local guidance notes and edetails of specific requirements in your area)	
We would like this as a 12 mor	nth Consent to cover all eventualities and will renew on annual basis	
Section 11 of 11		
PAYMENT DETAILS		
This fee must be paid to the au	uthority. If you complete the application online, you must pay it by debit or credit card.	
the fee depends on the type o	f application and period	
Fee amount (£)	655.00	
DECLARATION		
This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"		
Full name	Mr Adam Guppy	

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Capacity	Operations Manager - Relish
Date	22 / 09 / 2021 dd mm yyyy
	Add another signatory
continue with your application	outer by clicking file/save as v.uk/apply-for-a-licence/street-trading-licence/cotswold/apply-1 to upload this file and
OFFICE USE ONLY	
Applicant reference number	The Gateway Centre
Fee paid	
Payment provider reference	
ELMS Payment Reference	
Payment status	
Payment authorisation code	
Payment authorisation date	
Date and time submitted	
Approval deadline	
Error message	
Is Digitally signed	
< Previous <u>1</u> <u>2</u> <u>3</u> <u>4</u>	<u>5 6 7 8 9 10 11</u> Next >