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| **Application for a Street Trading Consent**Local Government (Miscellaneous Provisions) Act 1982  |  |

**Application Procedure**

* Complete the application electronically, as a word document and save it to your computer / phone.
* Please ensure that you complete the form in full.
* Pay the relevant fee
* Email your completed application, as a word document, and the following additional documents to licensing@wigan.gov.uk

**Additional Documents Checklist**

The following documents / codes **must be** provided when submitting your application. Failure to provide these documents within 5 days of submitting the application will result in it being returned and any fees paid will be refunded.

* A recent photograph of each Applicant / Assistant
* A plan of the site / location (if applicable)
* Evidence of permission to trade at the location (if applicable)

We aim to acknowledge receipt of your application within 5-7 working days (subject to receipt of a complete application). The timescales **only** begin on receipt of a completed application, all the required documents and the relevant payment.

Failure to submit a completed application, including supporting documents and the appropriate fee will delay the processing times.

**Type of Application**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| First Grant |  | Renewal  |  | Variation |  |

**B. Licence Period**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 12 Months |  | 6 Months |  | 3 Months |  |

|  |  |
| --- | --- |
| Occasional (1 Week) |  |

**Licence Details** (if applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| Licence No. | **STC** | Expiry Date |  |

|  |  |
| --- | --- |
| **A** | **Applicants Details** |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  1,  | Mr |  |  Mrs |  | Miss |  | Ms |  | Other |  |

|  |  |  |
| --- | --- | --- |
| 2. | Surname  |  |

|  |  |  |
| --- | --- | --- |
| 3. | Forename(s) |  |

|  |  |  |
| --- | --- | --- |
| 4. | Previous Names / Other Aliases |  |

|  |  |  |
| --- | --- | --- |
| 5. | Current Address (including postcode)  |  |

|  |  |  |
| --- | --- | --- |
| 6. | Date of Birth |  |

|  |  |  |
| --- | --- | --- |
| 7. | National Insurance No |  |

|  |  |  |
| --- | --- | --- |
| 8 | Contact Telephone Number (s) |  |

|  |  |  |
| --- | --- | --- |
| 9. | Email Address |  |

|  |  |  |
| --- | --- | --- |
| 10. | Nationality |  |

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| --- | --- |
| **B** | **Second Applicants Details** |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | Mr |  |  Mrs |  | Miss |  | Ms |  | Other |  |

|  |  |  |
| --- | --- | --- |
| 2. | Surname  |  |

|  |  |  |
| --- | --- | --- |
| 3. | Forename(s) |  |

|  |  |  |
| --- | --- | --- |
| 4. | Previous Names / Other Aliases |  |

|  |  |  |
| --- | --- | --- |
| 5. | Current Address (including postcode) |  |

|  |  |  |
| --- | --- | --- |
| 6. | Date of Birth |  |

|  |  |  |
| --- | --- | --- |
| 7. | National Insurance No |  |

|  |  |  |
| --- | --- | --- |
| 8 | Contact Telephone Number (s) |  |

|  |  |  |
| --- | --- | --- |
| 9. | Email Address |  |

|  |  |  |
| --- | --- | --- |
| 10. | Nationality |  |

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| **C** | **Assistant Details (If Applicable)** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you intend to employ assistants | Yes |  | No |  |

The following information must be completed in respect of all persons who will be named as an assistant on your Street Trading Consent.

|  |  |  |
| --- | --- | --- |
| **Name:** | **Date of Birth:** | **Full Address and Contact Details (including postcode, email and telephone number)** |
|  |  |  |
|  |  |  |
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| --- | --- |
| **D** | **Details of Convictions (if applicable)** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have any of the persons named above been convicted of any crime or offence | Yes |  | No |  |
| (applicants or assistants) |  |  |  |  |

If yes, please give details below:

|  |  |  |
| --- | --- | --- |
| **Name:** | **Date of Offence:** | **Details of Offence (including sentence and court):** |
|  |  |  |
|  |  |  |
|  |  |  |
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| --- | --- |
| **E** | **Previous Licence / Consents (if applicable)** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have any of the persons named above ever been **refused** a street trading consent or licence? | Yes |  | No |  |

|  |  |
| --- | --- |
| If **YES** please give details: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have any of the persons named above ever had a street trading consent or licence **revoked**? | Yes |  | No |  |

|  |  |
| --- | --- |
| If **YES** please give details: |  |

|  |  |
| --- | --- |
| **F** | **Application Details** |

|  |  |
| --- | --- |
| Trading Name of the Unit: |  |

|  |  |
| --- | --- |
| Proposed days of trading: |  |

|  |  |
| --- | --- |
| Proposed hours of trading: |  |

|  |  |
| --- | --- |
| State the articles you wish to sell: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you a food trader? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If **yes**, are you registered under the Regulation (EC) 852/2004 which relates to food Hygiene?  | Yes |  | No |  |

|  |  |
| --- | --- |
| Address / location at which you are to trade: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| I have enclosed a detailed site plan and a Google Maps image showing the correct location |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is the land on which you intend to trade privately owned? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If **yes**, do you have written evidence of permission to trade there? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have public liability insurance? | Yes |  | No |  |

|  |  |
| --- | --- |
| If yes, please provide details: |  |

|  |  |
| --- | --- |
| **G** | **Details of Stall / Unit** |

|  |  |
| --- | --- |
| Describe the sales unit and / or the vehicle towing the unit (e.g. make, model and colour if an ice cream van): |  |

|  |  |
| --- | --- |
| Address where the unit is kept /stored when not trading: |  |

|  |  |
| --- | --- |
| **H** | **Details of Payment** |

|  |  |
| --- | --- |
| Reference No. |  |

|  |  |
| --- | --- |
| Date of Payment |  |

|  |  |
| --- | --- |
| **I** | **Declaration** |

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| --- | --- |
| (a)(b)(c)(d) | I understand that if I knowingly or recklessly make a false statement or omit any material particular form this application or any document submitted with it, I would be guilty of an offence, punishable on conviction by a fine or imprisonment.I understand that all applicants and assistants **must** supply a passport size photograph.I declare that I and my assistants (if applicable) are not under 17 years of age. I understand that a copy of the application will be emailed to Greater Manchester Police and the Council’s Environmental Health, Environmental Protection, Markets and Network Management (Traffic) Teams. |

|  |  |
| --- | --- |
| Print Name |  |

|  |  |
| --- | --- |
| Date |  |