

# London Local Authorities Act 1990 (as amended)

Application for the Grant / Renewal of a Temporary Street Trading Licence

- All questions to be answered in full
- All applicants should provide proof of identity copy of passport, drivers licence photo card, (other official ID card with a photo & a copy of a recent utility bill (this will meet the money laundering requirements and the council undertaking due diligence.
- All applicants <u>MUST</u> complete section 1 & 2
- Applicants for a shop front display or a stall MUST complete sections 1,2,3 & 6
- Applicants for pavement cafes (placing tables and chairs on the highway) <u>MUST</u> complete sections 1,2,4 & 6
- Applicants for 'A' boards <u>MUST</u> complete sections 1,2,5 & 6
- All applicants <u>MUST</u> submit an accurately drawn plan to the scale of 1:2500 of the area to be applied for. (alternative sized plans may be accepted subject to prior agreement with the licensing manager)
- All applicants <u>MUST</u> submit photographs for the area to be applied for.
- All applicants <u>MUST</u> check with the planning team if planning consent is required prior to submission of an application
- L B Hounslow is under a duty to protect the funds it administers and to this end
  may use the information that you have provided to this authority for cross system
  and use the information that you have provided to this authority for cross system
  and cross authority comparison purposes for the prevention and detection of fraud.

I/We hereby apply to the London Borough of Hounslow under the above-mentioned Acts, to be licenced for Street Trading.

### SECTION 1 - Applicant Details

(Please complete if applying as a company)

Please state the trading name of your company			
FULLER, SMITH + TUR	1.010		
Registered address of company PIER	CHOUSE, 86-93 BRAND ON THE CIKERY		
Town LOWDOW	Postcode W43NN		
Tel No:	Email		
Please state Company Registration No	00291882		
What type of company PUB COM	PANY		

(Please complete if applying in person)

Title: Mr/Mrs/Ms/Other (pl	ease specify)		
Forename(s):			
Surname:			
Private Home address:			
Town:	Pos	tcode:	
Telephone No:		Email:	
National Insurance No:		Date of Birth:	
Place of Birth:			
SECTION 2 - Business	Details		
If you are colling food yo	MILET be registered as a fe	and business with Lead authority where your	
business is based.	ı <u>Musı</u> be registered as a fo	od business with Local authority where your	
business is based.			
Are you intending to sell f	ood? YES/NO		
	dence that you are registered	as a food business	
Registration No:	Date of Re		
May of Challet Service Control			
Local Authority:			
You MUST hold a Level 2	Qualification in Food Safety	in catering awarded by an accredited organisation	
such as the Chartered Institute of Environmental Health, Royal Society for Public Health or Highfield			
ABC. Your certificate sho	uld have been obtained in the	last 3 years. (Please include a photo copy)	
O-wifi4- N	Data assa		
Certificate No:	Date of Is	sue:	
Di di tito			
The second secon	tood you intend to sell, and n	ow and where the food you intend to sell will be	
produced?			
It is a requirement that yo	u MUST have public liability in	nsurance for a minimum of £2,000,000	
(please provide a copy of th		Total and to a minimum of £2,000,000	
,	,		
Certificate No:	Date of Issue:	Date of Expiry:	

It is a requirement to provide evidence on how you intend to remove trade waste from the site:

#### **Waste Contract No:**

It is a requirement that you provide evidence on how you will transport fresh water to the site and how you intend to dispose of the waste water.

#### Please state details here:

How do you intend to provide power to your site?
now do you interia to provide power to your site?
Please provide safety certificates for Generators, electrical equipment and Gas Cylinders
You <u>MUST</u> provide a plan of the licenced area for all types of application to the scale of 1:2500 (alternative sized plans may be accepted subject to prior agreement with the licensing manager)
Plan Attached:
You MUST provide photographs of the proposed licensed area
Photos attached:
Do you hold or have ever held a street trading licence in the L B Hounslow? YES/NO (If yes Please give details Inc., Number, location and dates)
PC127527 /202S
SECTION 3 – Shop Front Display/Stall
Name of Pitch/Shop Address of Pitch/Shop
Town: Postcode:
What type of goods offered for sale/displayed on shop front/Stall?

Size of pitch required (r. Depth: Trading Times:	neasurements in	Metres) Width:		
Monday Tuesday Wednesday Thursday Friday Saturday Sunday		amamamamamamamamamamam	pm pm pm pm pm pm	
Where will the stall/sho	o front display k	be stored at the end o	of trading hours?	
Stall Only: Please give	details of emplo	oyees:		
Full Name:	D.O.B	Address:		Photo:
1.				
2				
3				
4				
4				
4				
4				

# SECTION 4 - Pavement Café/Tables & Chairs

Name of premises	
Address	
Town:	Postcode:
Telephone No:	Email:
Size of area to be used for the pavement	ent café/seating area (measurements in Metres)
Depth:	Width:
Depth:	
Depth:	

Wednesday	pm	
Thursday	pm	
Friday	pm	
Saturday	pm	
Sunday	pm	
Where will the tables	& chairs be stored at the end of trading hours?	

## SECTION 5 – 'A' Boards or other Display Objects

Name of premises THE OUD PAC	k HOP 8F	The state of the s
Address 434 CHISWICK the	TH KOAD	
Town: LOW DOW	Postcode: W457F	
Telephone No:	Email:	
Size of area to be used for the 'A' Board Depth: 0.500	width: 0.8m	
Trading Times:		
Monday Tuesday Wednesday Thursday Friday		

Saturday Sunday .11 am - 12 pm .11 am - 10:30 pm

Where will the 'A' Board or Display Objects be stored at the end of trading hours?

INSIDE THE PUB

### **SECTION 6 – Applicant Declaration**

I/We declare that:

The details contained within this application form are true to the best of my/our knowledge and belief.

I have attached an accurate plan to the scale of 1:2500

I have attached photographs of the area to be licensed as required.

(Stall applicants only) I have attached/enclosed a full-face photograph of the applicant and any employee/s.

I have attached and provided evidence of food registration.

I have attached evidence of up to date Level 2 Food Safety in catering award

I have attached and provided evidence of a waste contract if required

I have attached and provided evidence of public liability insurance

I have attached and provided evidence of safety certificates for equipment





Payment of fee: BACS

In the reference field please put payment code C5361 V144 so it goes into the correct account. Then once you have the confirmation screen, please send a screen shot to me licensing@hounslow.gov.uk as confirmation of the payment. Please note until the Licensing Team have that confirmation we will be unable to process your application.

Re: Bank Account Details for BACS payment

National Westminster Bank, 275-277 High Street, Hounslow, TW3 1ZA

Full Company Name:

London Borough of Hounslow

A/C Name:

LB Hounslow Main Account

A/C No:

20364814

Sort Code:

60-11-18

IBAN:

GB79NWBK60111820364814

SWIFT BIC:

WBKGB2L

I request a call to take a card payment of the fee



I understand that if I do not complete the appropriate sections of the application form and provided the required information my application will be rejected.



Signature of Applicant /

Date: 06/05/25

Please return completed form to:

London Borough of Hounslow Community Enforcement and Regulatory Services - Licensing 7 Bath Road Hounslow TW3 3EB

Email - licensing@hounslow.gov.uk





