

APPLICATION FOR THE GRANT OF A PAVEMENT LICENCE

Before completing this application please read any associated guidance that can be found on our website at www.braintree.gov.uk/pavementlicence

If you need to provide additional information please do so on a separate appendix to this application and submit with all required documentation as requested

APPLICANT DETAILS		
Title:	First name(s):	Surname:
Postal Address:		
Post Town:	Post Code:	
Phone (Home):	Phone (Mobile):	
e-mail address:		
Date of Birth:	NI number:	

BUSINESS PREMISES DETAILS	
Trading Name:	
Postal Address:	
Purpose for which the business premises are used? (please tick one of the following options)	
Use as a public house, wine bar or other drinking establishment	
Other use for the sale of food or drink for consumption on or off the premises	
Both of the above uses	

AREA OF HIGHWAY PROPOSED TO BE USED

Please provide a description of the part of the highway to which this application relates:
(Please note you are required to submit a scale plan of this area with your application)

RELEVANT PURPOSE THE APPLICATION RELATES TO:

Which of the following relevant purposes do you wish to put furniture on the highway for?
(please tick one of the following options)

To sell or serve food or drink supplied from, or in connection with relevant use of, the premises	
For the purpose of consuming food or drink supplied from, or in connection with relevant use of, the premises	
Both of the above purposes	

DAYS AND TIMES

During what times do you propose to place furniture on the highway and on which of the following days:
Please use the 24hr clock.

Mondays	to	Fridays	to
Tuesdays	to	Saturdays	to
Wednesdays	to	Sundays	to
Thursdays	to		

FURNITURE TO BE PLACED ON THE HIGHWAY

Please provide a description of the furniture you propose to place on the highway

(Please note you are required to provide photographs or brochures of the proposed furniture with your application. Continue on a separate schedule if necessary)

Checklist:

- I have paid the fee of £100.00
- I have attached photographic evidence of the public notice
- I have enclosed a plan showing the extent of the area and layout of furniture
- Copy of public liability insurance.
- I understand that if I do not provide information requested that my application will be rejected.
- I understand that there is no assumed right of permission unless not determined within the required period. Where council refuse permission I understand that fees will not be refunded.

Rec. Ref

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DECLARATIONS BY APPLICANT

I understand that I am required to give notice of my application in accordance with the requirements of the Business and Planning Act 2020 and that failing to do so will lead to the revocation of any licence granted.

I understand I must hold and maintain public liability insurance up to a value of £5million.

I understand my application will not be considered to be complete until all the required documents and information have been provided and the application fee of £100 has been paid.

I understand that the application fee paid is non-refundable if my application is refused or if any licence granted is subsequently surrendered or revoked.

I understand that the Authority is under a duty to protect the public funds it administers, and to this end may use the information I have provided on this form for the prevention and detection of fraud. I understand that it may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

I declare that the information given above is true to the best of my knowledge and that I have not wilfully omitted any necessary material. I understand that if there are any wilful omissions, or incorrect statements made, my application may be refused without further consideration or, if a licence has been issued, it may be liable to revocation.

I understand that the Authority is collecting my data for the purposes described on this form and will not be used for any other purpose, or passed on to any other body, except as required by law, without my consent.

Date Submitted:
(Date of application)

Signed:

Print Name:

Please return this form with all relevant documents and proof that the application fee has been paid to:
licensing@braintree.gov.uk