

# APPLICATION FORM FOR A STREET TRADING ASSISTANT



<b>Surname</b>			<b>Mr/Mrs/Miss</b> (delete as applicable)
<b>First names (in full)</b>			
<b>Date of birth</b>		<b>National Insurance Number</b>	
<b>Full home address</b>			
	<b>Postcode</b>		
<b>Telephone number</b>		<b>Mobile number</b>	
<b>Email address</b>			

<b>Which site will you be working at?</b>	
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## Details of holder of street trading consent for the site:

<b>Surname</b>			<b>Mr/Mrs/Miss</b> (delete as applicable)
<b>First names (in full)</b>			
<b>Telephone number</b>		<b>Mobile number</b>	

<b>Give details of previous street trading experience (including locations and dates)</b>	
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Is this application for the first nominated assistant?	Yes / No
If no to the above, is this application for an additional/replacement assistant?	Additional / Replacement
If replacement, please give full name of assistant no longer working at the site:	

Do you have any unspent convictions?	Yes / No		
If yes to the above please give details in the table below:			
<u>Date</u>	<u>Court</u>	<u>Offence</u>	<u>Sentence</u>

## GUIDANCE NOTES

### Local Government (Miscellaneous Provisions) Act 1982

All applicants must be over the age of 17. If you propose to sell food, you must hold a current Basic Food Hygiene Certificate. If you do not have a European Union Passport, you should produce your visa or letter from the Immigration Office stating you are entitled to work in the United Kingdom.

The application form must be completed in full. Incomplete applications will not be processed.

If your application is refused, you have the right of appeal. Should you wish to lodge an appeal then you must do so within 7 days from the date of the decision in writing to the Head of Trading Standards and Licensing, Bracknell Forest Council, Time Square, Market Street, Bracknell, RG12 1JD.

### Fees for 2011/2012

First Nominated Assistant	No fee
Additional Assistants	£37.00

Payment can be made in the following ways:

- By cash or cheque (made payable to Bracknell Forest Borough Council) at Time Square, Market Street, Bracknell, RG12 1JD. Please allow 28 days for the cheque to clear.
- By credit or debit card at Time Square or over the phone on 01344 352000.

### Please tick to confirm you have enclosed the following with your application:

<input type="checkbox"/>	A cheque for payment of the fee, or receipt confirmation that the fee has been paid
<input type="checkbox"/>	Two passport photographs of the applicant
<input type="checkbox"/>	Current Basic Food Hygiene Certificate (if you propose to sell food)
<input type="checkbox"/>	European Union Passport or visa confirming entitlement to work in the UK

The completed form, fees and any enclosures should be handed into the Customer Service Centre at Time Square, Market Street, Bracknell, RG12 1JD.

**If the application is withdrawn before determination, up to 50% of the fee may be refundable. If the application is determined fees will only be refunded in exceptional circumstances.**

An applicant commits an offence if they knowingly or recklessly make a false statement or omit any relevant information and any licence issued may be revoked. Information provided on application forms will be disclosed to other agencies such as the Police where there is a legal requirement to do so, for example in relation to the investigation of a suspected offence. This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing and administering public funds for these purposes. For further information, see [www.bracknell-forest.gov.uk/nfi](http://www.bracknell-forest.gov.uk/nfi) or contact Internal Audit on 01344 352322.

### Declaration:

**I hereby certify that all statements in this application are correct and true to the best of my knowledge. I have read the guidance supplied, enclosed any required documentation and fees, and agree to abide by the conditions placed on the consent should it be granted.**

Signature ..... Date .....  
(Applicant)

Signature ..... Date .....  
(Consent Holder)