**STREET TRADING**

**London Local Authorities Act 1990 Part III**

**APPLICATION TO RENEW A STREET TRADING LICENCE (SHOPFRONT/MOBILE VEHICLE)**

**Please complete all relevant sections of this form ensuring that answers are clear and legible.**

**Licence number**

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| I/We  | (Licensee) |

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| Shop Name:  |
| Shop Address:(or static location of mobile vehicle) |
| Telephone Number:  |
| Email:  |
|  **LIMITED COMPANY/OTHER**  |
| Nature of organisation:  |
| Full name of the organisation:  |
| Company registration number/Registered charity number:  |
| Registered Office address:  |
| Telephone Number:  |
| Email address:  |
| **Director/Trustee/etc.** (please state)  |
| Mr/Mrs/Miss/Ms/other  | Surname: |
| First Name(s):  |
| Full Home Address:  |
| Contact Telephone Number:  |
| Date of Birth:  |

**The licence may only be renewed on submission of this form alone if there are NO changes to any information provided on the application for a licence submitted last year. If there have been any changes or you wish to make any changes to the new licence, you must complete and submit a new application form.**

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| I/We confirm that no changes to the licence are required Yes [ ]  No [ ]  |

**ADDITIONAL INFORMATION**

Please ensure that you provide the following with this application form:

* Proof of valid public liability insurance with minimum liability cover of at least £2,000,000 (two million pounds)
* Proof of a current commercial waste collection contract
* Proof of home address for any person named on the application form

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| **DECLARATION** |
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| ***I/We* declare that the information contained in this application form is correct to the best of my/our knowledge and belief.** [ ]  |

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| **FOR OFFICIAL USE ONLY** |
| **Correct fee paid?** |  |
| **Proof(s) of home address enclosed?** |  |
| **Commercial Waste contract enclosed?** |  |
| **Public liability insurance expiry date** |  |

**Please submit completed forms by e-mail to:** streettrading@lbbd.gov.uk