

19/02516/STRT

Civic Government (Scotland) Act 1982

SCOTTISH BORDERS COUNCIL


**APPLICATION FOR GRANT/RENEWAL OF A  
STREET TRADER LICENCE**

8 - AUG 2019

Please read the attached guidance notes before completing this form

Question 1 or 2, and all other questions must be answered. Please use block capitals. LICENSING UNIT

1. To be completed if applicant is a private individual

Full name (if you are a married woman, give your maiden name too)	Surname	SCLAVER
	Forenames	JOHN
Home Address		
Post Code		
Telephone No. (business hours)		
E-mail Address		
Age, Date and Place of Birth		
Is applicant to carry out the day to day management of the street trading?	YES	NO - give details
If not, give full name, address and date of birth of any manager.		
Contact telephone number E- Mail Address		

2. To be completed if applicant is not a private individual (e.g. Company or partnership)

Full name		
Address and Postcode of Principal or Registered Office		
Telephone number and email address		
Names, private addresses and dates of birth of directors, partners or other persons responsible for its management		
Name, address and telephone number of manager		
Age, date and place of birth of manager	Age	Date of Birth
	Place of Birth	

Date Rec'd	Fee Paid	Date to Police, Fire, EHO, Planning, Trading Standards, Transport	Reply	Objectors	Granted/ Refused	
8/8/19.	£82	9/8/18	no 205 23/8	9/8(JH) none		

For office use only

9/8/18

CofC. 27/8/19.

3. (a) Do you currently hold a licence or permit for street trading?	<del>YES</del> - give details	NO
(b) Have you ever applied for and been refused a licence/permit for street trading or had a Street Traders Licence suspended?	<del>YES</del> - give details	NO
4. (a) State locality in which you propose to trade	LAYBY SCOTSH BORDERS	
(i) Do you propose to trade from particular location(s) only?	YES	NO
(ii) If YES, Please identify location(s) by reference to street names or a sketch map if necessary	LAYBY 150 MT SOUTH OF EARLSTON ON THE A68	+ EVENTS AND FESTIVALS THROUGHOUT SBC AREA
(b) If you propose to trade from any location which is not on the carriageway of any street, are you the owner of the site(s)?	<del>YES</del>	NO
If not, a letter of consent from the owner of every such site must accompany this application	TRANSPORT SCOTLAND	
5. (a) Specify the proposed days and hours of opening	07.00 - 16.00 MON - FRI	
(b) Specify period of the licence (maximum 3 years)	08.00 13.00 SATURDAY	
6. Nature of goods/services in which you propose to trade	HOT AND COLD SNACKS & DRINKS	
7. Address of premises at which the goods will be stored when not being offered for sale	GATED COMPOUND LANGLANDS MILL LANGLANDS PLACE NEWTOWN ST BOSWELL	
8. State type and registration number of any vehicle or give details of any stall, kiosk or other structure to be used for street trading.	8X6T WILKINSONS FLEETING TRAILER TOWED BY OWNERS CAR J555SEL	

9. Subject to the provisions of the Rehabilitation of Offenders Act 1974, has any party named in 1 or 2 above been convicted of any crime or offence?

YES / NO If YES give details below

Date	Court	Offence	Sentence
Continue on a separate page if necessary			

**10. Declaration.**

A. \* I declare that I am/We declare that we are complying with Paragraph 2(2) of Schedule 1 of the Civic Government (Scotland) Act 1982 regulating the display of a site notice for a period of 21 days from today, at or near the premises so that it can be conveniently read by the public.

B. \* I declare that I am/We declare that we are unable to display a notice of this application at or near the premises because no access is available. The following action was taken to try to gain access:

but was unsuccessful.

Or

C. \* I/We declare that the application is for a temporary licence and therefore there is no requirement to display a site notice.

D. I/We declare that the particulars given by me/us on this form are correct to the best of my/our knowledge and belief.

\* Delete A, B or C as appropriate

I/ We declare that the particulars given on this form are correct to the best of my knowledge and belief.

I/ We understand that the information supplied by me/us as detailed in this form may be stored on a computer system by this Authority for the purpose of Licensing and that information may be disclosed to the police and other relevant parties for vetting and background enquiries whilst processing this application.

I/We understand that 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 or administering public funds for these purposes. For further information see :- [National Fraud Initiative \(NFI\) Code of Conduct](#) or contact the Fraud Hotline on 01835 826825

Signature of Applicant:

Date: 08.08.2019.

Signature of Agent (if applicable):

Date:

