

**BUSINESS AND PLANNING ACT – APPLICATION FOR THE GRANT/RENEWAL  
OF A PAVEMENT LICENCE**

<b>APPLICANT DETAILS</b>		
Title:	First name(s):	Surname:
Postal Address:		
Phone (Business):	Phone (Mobile):	
e-mail address:		
Date of Birth:	NI number:	

<b>BUSINESS PREMISES DETAILS</b>	
Trading Name:	
Postal Address:	
Which of the following is the above premises used for? (please tick one)	
Use as a public house, wine bar or other drinking establishment	<input type="checkbox"/>
Other use for the sale of food or drink for consumption on or off the premises	<input type="checkbox"/>
Both of the above uses	<input type="checkbox"/>

<b>RIGHT TO OCCUPY THE PREMISES</b>
If the premises does not currently hold a licence under the Licensing Act 2003, please detail the lease/rental arrangements or supply a copy of the agreement.

**AREA OF HIGHWAY PROPOSED TO BE USED**

Please provide a description of the area of the highway to which this application relates: **(You must submit a scale plan of this area with your application showing the location of the premises outlined in red so the application site can be clearly identified. The plan must show the positions and number of the proposed tables and chairs, together with any other items that the applicant wishes to place on the highway. The plan shall include clear measurements of, for example, pathway width/length, building width and any other fixed item in the proposed area.**

**RELEVANT PURPOSE THE APPLICATION RELATES TO:**

Which of the following relevant purposes do you wish to put furniture on the highway for? **Tick one**

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

**DATE APPLICATION IS MADE**

**DAYS AND TIMES**

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

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

**DURATION OF LICENCE**

Please specify the duration of licence you are seeking.

**FURNITURE TO BE PLACED ON THE HIGHWAY**

Please provide a description and numbers of the furniture you proposed to place on the highway, and include photographs with this application.

## ADVERTISEMENT OF APPLICATION

Please detail where the notice has been displayed on the premises, and the date the notice was first displayed. A photograph of the notice must be submitted with this application.

## 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 has been paid (payment will be taken prior to or on receipt of the application).

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 confirm I have the right to remain and work in the United Kingdom

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.

Signature:

Date:

Please return this form with all relevant documents to [licensing@epsom-ewell.gov.uk](mailto:licensing@epsom-ewell.gov.uk)