

Application to trade in public places

Please read this first

This form will be scanned by electronic equipment. It is important that you:

- use a blue or black pen to mark your answers; and
- print clearly.

Applicant details *(Please print in CAPITALS)*

Title: Mr Mrs Miss Ms

First names

Surname

Postal address

Town Postcode

Home phone number Work phone number Mobile phone number

Email

Please attach evidence of good character.

Details of person selling the goods *(Please print in CAPITALS)*

Full name

Postal address

Town Postcode

Date(s) and times on which the stall is intended to operate

Date	Time
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Office use only

Approved Yes No Date / / Signed NAR •

Event and location

Name of event

Location at which the stall is intended to operate

Type of goods to be sold

Describe the type of goods for sale

Vehicle details *(if applicable)*

Vehicle type

Vehicle registration number

Attachments *(if applicable)*

- Written approval from landowner (*private property*).
- Detailed site plan.
- Photos of signage.
- Photos of vehicle/stall.
- Registered Food Business – copy of approval certificate.

Signature

Signature of applicant

 / /

Date