Business and Planning Act 2020

Pavement Licence Application Form

| Applicant details | | | | | | | |
|--|---------------------------|--|--------|--|--|--|--|
| Name of applicant | | | | | | | |
| Address of applicant | | Alternative address for correspondence | | | | | |
| | | | | | | | |
| Telephone number | | | | | | | |
| Mobile number | | | | | | | |
| Email address | | | | | | | |
| Details of premises to | be licensed | | | | | | |
| Name of premises | | | | | | | |
| Address of premises | | | | | | | |
| Nature of business, eg café, restaurant | | | | | | | |
| Do you have day-to-day man | agement of the business ? | | Yes No | | | | |
| Are you the freeholder of the | business? | | Yes No | | | | |
| Are you the leaseholder of th | e business? | | Yes No | | | | |
| Are you the owner of the bus | iness? | | Yes No | | | | |
| Please describe the type of street furniture to be used e.g. tables & chairs, street shelving. | | | | | | | |



| Please give the siz | e of th | e area to be used in square me | tres. | | | M ² | |
|---|--|---|--|--|---|--|--|
| Please give the day | ys and | times the street furniture will l | oe used. | | | | |
| Day | ✓ | Start time | | | End time | | |
| Monday | | | | | | | |
| Tuesday | | | | | | | |
| Wednesday | | | | | | | |
| Thursday | | | | | | | |
| Friday | | | | | | | |
| Saturday | | | | | | | |
| Sunday | | | | | | | |
| If you have an exis | ting li | cence please give the reference | number a | nd expiry d | ate. | | |
| | | | | Date | | | |
| This application | must l | be accompanied by (please tid | :k) | | | | |
| the area require of the tables are for the tables are appropriate that the notice reparter the day the area included. You are consideration all reprovided on this for bodies responsible www.iwight.com/ | ing pe nd cha of the o affix nd leg mains i pplica encour eprese nder a orm fo e for a /nfi to | gible to the public on the day year in place for the duration of the attion is submitted to the author raged to keep evidence of this entations made in connection of the public funder the prevention and detection uditing or administering public view the Level 2 notice. | val Confroit Froit Submit your submit with the apoint of fraud. With the for the submit sub | ue insured sonfirmation was the land of th | c liability insurance, the minimus shall be £10 million. Whether or not permission is requowner - if not Isle of Wight Counticensing Section) to the premation to the authority. You must working days beginning with every property of the licence until it has taken as the information you has share this information with others. For further information, see mation given on this application | quired ncil land. ises, so st ensure the day re not en in to ave | |
| and to the best of | my kn | owledge and belief it is correct | . I understa | and that a fa | nation given on this application alse or misleading statement, o he permit and/or may render m | r that | |
| Signed | | | | Date | | | |
| Tel. 01983 823 The Isle of Wight Council is | 3159 the data | , County Hall, High Street Email: licensing@iow.controller for the personal information you price council by phone on 01983 821000, or by we | jov.uk rovide on this fo | rm. The council's | data protection officer can be contacted at | | |
| For office use only | Recei | pt number | | Reference | number | | |