## **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 management of the business? Are you the freeholder of the business? Are you the leaseholder of the business? No Are you the owner of the business? Yes No Please describe the type of street furniture to be used e.g. tables & chairs, street shelving.

Please give the siz	e of the ar	rea to be used in square metres			M
Please give the da	ys and tim	nes the street furniture will be u	ısed.		_
Day	<b>✓</b>	✓ Start time		End time	
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
1 year licence? <b>£1</b>	50 [	ration of the licence (please tick  2 year licence? £225  ce please give the reference nu	<b>5</b> 🗆	xpiry da	te.
			D	Date	
of the tables a  A photograph  You are required to it is easily visible a that the notice rerushmitted to the a	nd chairs a of the pro o affix a pr nd legible mains in pl authority (	to the public on the day you su lace for the duration of the pub excluding public holidays)). You	from t available fro ubmit your a dic consulta a are encou	he land on the Lapplicatition (14	whether or not permission is required owner - if not Isle of Wight Council land icensing Section) to the premises, so on to the authority. You must ensure days after the date the application is keep evidence of this. The council as made in connection with the
provided on this fo	orm for the for audit	e prevention and detection of fing or administering public fund	raud. We m	nay also	ay use the information you have share this information with other es. For further information, see
and to the best of	my knowl	edge and belief it is correct. I u	nderstand t	that a fa	nation given on this application form see or misleading statement, or that e permit and/or may render me liable
Signed			D	ate	
Tel. 01983 82 ThelsleofWightCouncilis	3159 Er	ounty Hall, High Street mail: licensing@iow.go collerforthepersonalinformationyouprovid councilbyphoneon01983821000, or byw	<b>v.uk</b> eonthisform.Tl	necouncil's	dataprotection officer can be contacted at
For office	Receiptn	number	Re	Reference number	

use only