

Shetland Islands Council Civic Government (Scotland) Act 1982 Section 39

FEE PAID	£
RECEIPT NO.	
DATE RECEIVED	
RECEIVED BY	

PLEASE COMPLETE IN BLOCK CAPITALS

TYPE OF LICENCE APPLIED FOR

APPLICATION FOR GRANT/RENEWAL OF LICENCE TO ACT AS AN INDIVIDUAL STREET TRADER

Grant							
•							
APPLICANT DETAILS							
Full Name							
Home Address							
Postcode							
Telephone Number							
Mobile Number							
E-mail							
Date of Birth							
Place of Birth							
Are you self employed	YES/NO						
If no, Name & address of Street Tra employing you	der						
Do you plan to carry out the day to da management of the business?	y YES/NO						
If NO, please provide the Full Name , Birth of the person responsible for the			et number and Date of Birth & Place of				
* This Person must also complete a Street Trader or Individual Street Traders Application Form							

Photographic Identification

Two passport size photographs must be supplied. They should be recognisable and there should be no hats/head covering or glasses worn. The photograph will be used to produce the identification badge for individuals working as a Street Trader & must be worn as part of the licence conditions.

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CRIMINAL CONVICTIONS								
Subject to the provisions of the Rehabilitation of Offenders Act 1974, has any party named in this form ever been convicted of any crime or offence? Please note that any foreign convictions should be declared. If no, please write NONE below.								
Name	Date	Court	Offence	Sente				
PREVIOUS LICENCE								
Have any persons named in		oes currently hold a St	reet Trader Li	cence?	YES/NO			
If YES, which Authority issue	d it?							
What was the reference num	ber?							
PROPOSED FOOD BUSINE	SS							
Details of food hygiene traini	na							
(enclose copy of certificate)	9							
I declare that the particulars given by me on this form are correct to the best of my knowledge and belief. I hereby make application to Shetland Islands Council for the grant or renewal of a street trader's licence.								
Date								
Signature of applicant or agent								
Agents Address								
N.B. Any person who in or in connection with the making of this application makes any statement which he knows to be false or recklessly makes any statement which is false in a material particular shall be guilty of an offence and liable, on summary conviction, to a fine.								
Data Protection: Shetland Islands Council will use the information about you on this form to process your licensing application. In processing your application, the information you have provided may be shared between Council departments and with other agencies where necessary. By signing this form you consent to the Council sharing your information in this way. The Council has a duty to process your information fairly and in accordance with the provisions of the Data Protection Act 1998. We will ensure that the information we hold is accurate, up to date, is kept as long as necessary and is otherwise shared only where we are legally obliged to do so. You can request access to the personal information held about you by the Council by writing to the Head of Governance and Law, Legal Department, 8 North Ness Business Park, Lerwick, Shetland.								
Checklist prior to submission of Application Form								
Fee (Non- Refundable)								
2 Colour Passport Photos								

This form is to be lodged with Environmental Health, Gutters Hut, 7 North Ness, Lerwick, Shetland, ZE1 0LZ. Please note the fee is an application fee; it will not be refunded in the event of the licence application being either withdrawn or refused.

Food Hygiene certificate

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