

wk/201716297-



Highways Act 1980 - Section 115

Application for a Street Furniture Licence

1. Applicant

Full name

ROBIN NORRIS

Date of birth

04-06-1974

Address including postcode

SUITE 5 THE LIMES BUSINESS CENTRE
6 BROAD STREET
DEAL, KENT CT14 6ER

Telephone number(s)

Mobile number

-AS ABOVE-

Email address

2. Business

Name

PORT OF CALL T/A CAPPAGH CAPITAL

Address including postcode

18-19 MARKET SQUARE
DOVER
KENT CT16 1NX

Telephone

3. Licence Required

From (month) To (month)

Days

Between the times and

Number of tables

Number of chairs

Brief description of type and quality of tables and chairs
Please also provide photos if possible

4. Additional Information

Do you have toilets for customers to use? Yes No

If yes, please say how Many?

Have you sought the advice of the environmental health officer in respect of food hygiene and health and safety matters? Yes No

Have you ever been refused a street furniture Licence in this or any other areas? Yes No

If yes, please give details

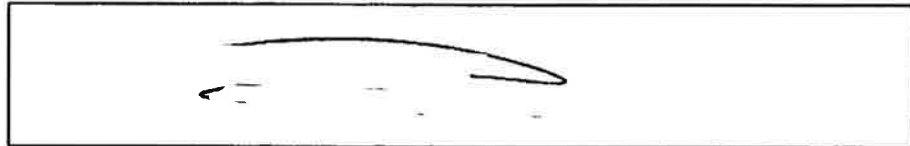
**PLANNING PERMISSION MAY BE REQUIRED
PLEASE TELEPHONE 01304 872042.**

5. Declaration

I enclose

- Plan showing dimensions of area of highway and proposed layout of street furniture (AS PER 2016 APPLICATION)
- Copy of Public Liability Insurance
- Fee: £75 Application Fee or £35 For Annual Renewal.
- I declare that I have checked the information given on this application form and to the best of my knowledge and belief it is correct.

Signature



Date

28/03/2017

Notes

1. If any person makes a false statement or omits any material particular in giving the foregoing information knowingly he may be guilty of an offence and liable to prosecution. In addition the licence may be revoked forthwith.
2. Please complete this form on a computer or in block capital letters and return it to
Licensing
Dover District Council
White Cliffs Business Park
Dover CT16 3PJ

For Office Use Only		
Date	Time	Officer
Receipt number		Fee £
Licence number		Issue date