

## DOVER DISTRICT COUNCIL

## HIGHWAYS ACT 1980 - SECTION 115

## APPLICATION FOR STREET FURNITURE LICENCE

APPLICANT:

SURNAME: Richardson	
FORENAME (S) in full: Harry	
PERMANENT ADDRESS: [REDACTED]	
COUNTY: [REDACTED]	POST CODE [REDACTED]
TELEPHONE NO: [REDACTED]	Code [REDACTED]
DATE OF BIRTH: [REDACTED]	

TRADING DETAILS:

NAME OF BUSINESS: The Elephant and Hind	
ADDRESS: 18-19 Market Square	
COUNTY: Kent	POST CODE CT16 1NX
TELEPHONE NO: [REDACTED]	Code [REDACTED]

LICENCE REQUIRED:

PERIOD FROM TO (MONTHS)	August 22 - August 23
DAYS:	365
BETWEEN THE TIMES:	Midday AND Midnight
NO. OF TABLES:	13
NO. OF CHAIRS:	[REDACTED] 28
NO. OF BENCHES:	12
BRIEF DESCRIPTION OF TYPE AND QUALITY OF TABLES AND CHAIRS:	
Please also provide photos if	

**ADDITIONAL INFORMATION**

DO YOU HAVE TOILETS FOR CUSTOMERS TO USE?	<input checked="" type="radio"/> YES <input type="radio"/> NO
IF YES, PLEASE SAY HOW MANY?	6
HAVE YOU SOUGHT THE ADVICE OF THE ENVIRONMENTAL HEALTH OFFICER IN RESPECT OF FOOD HYGIENE AND HEALTH AND SAFETY MATTERS	<input checked="" type="radio"/> YES <input type="radio"/> NO

HAVE YOU EVER BEEN REFUSED A STREET FURNITURE LICENCE IN THIS OR ANY OTHER AREAS?

YES   NO

IF YES, PLEASE GIVE DETAILS

---

---

---

PLEASE BE ADVISED PLANNING PERMISSION MAY BE REQUIRED, PLEASE TELEPHONE 01304 872042.

**ENCLOSED:**

Plan showing dimensions of area of highway and proposed layout of street furniture

Copy of Public Liability Insurance

Fee: £75.00 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.

Signed:



Date:

26<sup>th</sup> August 22

NOTE:



