

STALLHOLDER APPLICATION FORM

Name:.....

Trading name:.....

Company Structure: (please circle) sole trader / Ltd. Partnership

Business Address:

.....

Home Address (if different from
 business address):

.....

Postcode:.....

Postcode:.....

Telephone Number:.....

Telephone Number:.....

Email:.....

Email:.....

Please tick the box that best describes your core business:

<input type="checkbox"/>	Fruit	<input type="checkbox"/>	Hot/cold foods to take away
<input type="checkbox"/>	Vegetables	<input type="checkbox"/>	Honey products
<input type="checkbox"/>	Cheese & dairy products	<input type="checkbox"/>	Preserves
<input type="checkbox"/>	Eggs	<input type="checkbox"/>	Drinks
<input type="checkbox"/>	Raw meat & meat products	<input type="checkbox"/>	Plants & flowers
<input type="checkbox"/>	Bread, pastries & baked goods	<input type="checkbox"/>	Other <i>please specify below</i>

Other:.....

If you change your trade or develop new lines you must fill out a new application form.

Are you a member of any assurance or certification scheme (e.g. Organic)?

	Yes- please provide a copy of your certification document	No
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Applicant statement

Please tick to acknowledge:

	I understand that my details may be passed to Environmental Health and Trading Standards
	If selling food, I am aware of the Food Safety Act.
	If selling food, I have the necessary food hygiene certification and I will provide a copy to Deal Town Council.
	I hold a Public Liability insurance and I will provide a copy to Deal Town Council. .
	I agree to uphold the rules and standards of the market and ensure that any employees do likewise.
	I will provide photographic proof of identity, for example a valid passport or driving license.

I, the undersigned, declare that the information provided is correct:

Signed.....Print name:.....

Date.....

Please tick if you agree to your details being used by Deal Town Council in advertising materials about the Markets

<i>For Office use only:</i>	
Certificate:	Provided:
Copies of certification for assurance scheme (if applicable)	
Food hygiene certification (if applicable)	
Public Liability insurance	
Photographic proof identity	
KCC/Police Trading License (if applicable)	

Please return to: Deal Town Council
 Town Hall
 High Street
 Deal
 CT14 6TR

Tel: 01304 361999