

**APPLICATION FOR A PAVEMENT LICENCE UNDER SECTION 1 OF THE BUSINESS AND PLANNING ACT 2020**

<b>1. Name and Location of the Business Premises</b>			
<b>2. Telephone Number:</b>			
<b>3. Email Address:</b>			
<b>4. Nature of the business (e.g. public house, café, licensed restaurant etc)</b>			
<b>5. Name and address of the Applicant</b>			
<b>6. Proposed days and hours of use of the pavement licence</b>			
Day	Tick	From	Until
Monday	<input type="checkbox"/>		
Tuesday	<input type="checkbox"/>		
Wednesday	<input type="checkbox"/>		
Thursday	<input type="checkbox"/>		
Friday	<input type="checkbox"/>		
Saturday	<input type="checkbox"/>		
Sunday	<input type="checkbox"/>		
<b>7. Proposed number of tables</b>			
<b>8. Proposed number of chairs</b>			
<b>9. Please provide details of any other street furniture (e.g. parasols, planters, heaters)</b>			

<b>10. Do you intend to use barriers – if so please provide details</b>	<b>Yes</b>	<b>No</b>
<b>11. Do you intend to:</b>	<b>Yes</b>	<b>No</b>
<b>A. Place furniture within 20m of a road junction or roundabout</b>	<b>A.</b>	<b>A.</b>
<b>B. Place furniture within 15m of a push button, zebra crossing or pedestrian island crossing</b>	<b>B.</b>	<b>B.</b>
<b>C. Place furniture within 5m of a bus stop</b>	<b>C.</b>	<b>C.</b>
<b>If yes to the above please give details</b>		
<b>14. Plan</b> You must enclose a detailed plan of your proposal please tick to indicate that this is enclosed. The plan must include dimensions of the proposals and the dimensions of the remaining footpath	<b>Plan Enclosed</b> <input type="checkbox"/>	
<b>15. Public Liability Insurance</b> You must hold public liability insurance up to a minimum value of £5 million	<b>Public Liability Insurance enclosed</b> <input type="checkbox"/>	

**Please read the following declaration carefully before signing**

I confirm that the information included with this application is correct

I confirm that I have posted the required public notice at the premises and that it will remain in place throughout the entire consultation period of seven days from the date of this application

I understand I must hold and maintain public liability insurance up to a value of £5million.

I understand that the pavement area shall be vacated immediately if request by officers of Swale Borough Council, Kent County Council or Kent Police, or other emergency services and that no compensation will be payable

I understand my application will not be considered to be complete until all the required documents and information have been provided and the application fee of £100 has been paid.

I understand that the application fee paid is non-refundable if my application is refused or if any licence granted is subsequently surrendered or revoked.

I understand that the Authority is under a duty to protect the public funds it administers, and to this end may use the information I have provided on this form for the prevention and detection of fraud. I understand that it may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

I understand that the Authority is collecting my data for the purposes described on this form and will not be used for any other purpose, or passed on to any other body, except as required by law, without my consent.

I agree to abide by the terms and conditions written into the licence

Licensees should be aware that if Swale Borough Council, Kent County Council or Kent Police request you reconfigure or remove tables and chairs to accommodate social distancing measures this must be complied with

Swale Borough Council reserve the right to revoke the licence if conditions are breached

**SIGNED**

**DATE signed**

**PRINT NAME**

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**DATE THE APPLICATION HAS BEEN SUBMITTED TO SWALE COUNCIL:**