

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

1.	Name and Loca	tion of t	he Business Pr	emises				
2.	Telephone Num	nber:						
3.	. Email Address:							
4.	Nature of the business (e.g. public house, café, licensed restaurant etc)							
5 .	5. Name and address of the Applicant 6. Proposed days and hours of use of the pavement licence							
				•				
	Day	Tick	From		Until			
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Saturday							
	Sunday							
7.	7. Proposed number of tables							
8.	Proposed number of chairs							
9.	Please provide heaters	details c	f any other stre	eet furniture (e.	g. parasols, planters,			

10. Do you intend to use barriers – if so please provide details	Yes		No				
11. Do you intend to:	Yes		No				
A. Place furniture within 20m of a road junction or roundabout	A .		Α.				
B. Place furniture within 15m of a push button, zebra crossing or pedestrian island crossing	В.		B.				
C. Place furniture within 5m of a bus stop	C.		C.				
If yes to the above please give details							
14. Plan You must enclose a detailed proposal please tick to ind is enclosed. The plan must dimensions of the proposal dimensions of the remaining	icate that this t include ils and the	Plan Enclosed					
15. Public Liability Insuran You must hold public liabil up to a minimum value of £	ce lity insurance	Public Liability Insurance enclosed					

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 14 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 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

DATE THE APPLICATION HAS BEEN SUBMITTED TO SWALE COUNCIL: