

## Application for the grant of a pavement licence

### Business Address Confirmation

Selected business address \*

CAFE D-LICIOUS 14-15 OLD MARKET WISBECH  
CAMBRIDGESHIRE PE13 1NJ

### Applicant Details

Title \*

[REDACTED]

First name(s) \*

[REDACTED]

Surname \*

[REDACTED]

Postal address \*

[REDACTED]

Address line 2

[REDACTED]

Address line 3

[REDACTED]

Post town \*

[REDACTED]

Postcode \*

[REDACTED]

Phone (Home) \*

[REDACTED]

Phone (Mobile)

[REDACTED]

Email address \*

[REDACTED]

Date of birth \*

[REDACTED]

NI number \*

[REDACTED]

## Business Premises Details

Trading name \*

Cafe d-licious

Selected business address \*

CAFE D-LICIOUS 14-15 OLD MARKET WISBECH  
CAMBRIDGESHIRE PE13 1NJ

Business phone number \*

01945350659

Which of the following is the above premises used for? \*

Other use for the sale of food or drink for consumption on or  
off the premises

## Area Of Highway Proposed To Be Used

Please provide a description of the area of the highway to which this application relates: \* (Please note you are required to submit a scale plan of this area with your application)

The temporary furniture two tables and four chairs and a advertising sign are place for six metres long and one metre wide in front of the shop only Doesn t cover the pedestrian area and let the people free to walk on the footpath The clear access of the road is maintained during the business hours and the furniture are in place only Monday to Saturday from eight am to five pm

## Relevant Purpose The Application Relates To

Which of the following relevant purposes do you wish to put furniture on the highway for? \*

Both of the above purposes

## Days and Times

Please enter the days and times of the week you wish to place the furniture on the highway. Please enter times in 24hr format (HH:MM)

Day \*

Monday

08:00

17:00

## Days and Times

Please enter the days and times of the week you wish to place the furniture on the highway. Please enter times in 24hr format (HH:MM)

## Days and Times

Day \*

Tuesday

08:00

17:00

## Days and Times

Please enter the days and times of the week you wish to place the furniture on the highway. Please enter times in 24hr format (HH:MM)

Day \*

Wednesday

08:00

17:00

## Days and Times

Please enter the days and times of the week you wish to place the furniture on the highway. Please enter times in 24hr format (HH:MM)

Day \*

Thursday

08:00

17:00

## Days and Times

Please enter the days and times of the week you wish to place the furniture on the highway. Please enter times in 24hr format (HH:MM)

Day \*

Friday

08:00

17:00

## Days and Times

Please enter the days and times of the week you wish to place the furniture on the highway. Please enter times in 24hr format (HH:MM)

Day \*

Saturday

08:00

17:00

## Furniture To Be Placed On The Highway

Please provide a description of the furniture you propose to place on the highway \* (Please note you are required to provide photographs or brochures of the proposed furniture with your application)

Tables are hard plastic and brown colour and the chairs are rattan and brown colour The advertising sign is just plastic

## Declaration

I understand that I am required to give notice of my application in accordance with the requirements of the Business and Planning Act 2020 and that failing to do so will lead to the revocation of any licence granted. I understand I must hold and maintain public liability insurance up to a value of £5million. I understand my application will not be considered to be complete until all the required documents and information have been provided and the appropriate 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 declare that the information given above is true to the best of my knowledge and that I have not wilfully omitted any necessary material. I understand that if there are any wilful omissions, or incorrect statements made, my application may be refused without further consideration or, if a licence has been issued, it may be liable to revocation. 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.



Declaration made

Name \*

[REDACTED]

Date \*

21/09/2023