



**Licence to Trade at Neston Markets  
Trader Application Form**

**All Fields must be completed**

<b>Name</b> <i>Mr/Ms/Miss/Mrs</i>	<hr/>		
<b>Trading as:</b>	<hr/>		
<b>Address:</b>	<hr/>		
	<hr/>		
	Postcode	<hr/>	
<b>Telephone number:</b>	Home:	Mobile:	
<b>Email address:</b>	<hr/>		
<b>NI number:</b>	<hr/>		
<b>Do you have a right to work in the UK?</b>	<hr/>		
<b>At which other markets do you trade?</b>	<hr/>		
<b>Do you employ anyone else to work with you on your stall?</b>	Name, DOB and NI number:	<hr/>	
	Name, DOB and NI number:	<hr/>	
	Name, DOB and NI number:	<hr/>	
<b>Public Liability Insurance company:</b>	<hr/>		
<b>Policy number:</b>	<hr/>		
<b>Sum Insured:</b>	<hr/>		
<b>Expiry date:</b>	<hr/>		
<b>Number of pitches required:</b> <i>(standard pitch size is 2.5x2.5m)</i>	<hr/>		
<b>What commodities/lines would you like to trade?</b> <b>(please give as much information as possible)</b>	<hr/>		
<b>Trading days required:</b>	<hr/>		
<b>Vehicle Registration number:</b>	<hr/>		
<b>Proposed start date:</b>	<hr/>		
	<hr/>		

All traders must have current Public Liability Insurance to the value of no less than £5,000,000 cover. Traders must be able to produce evidence of such insurance upon request. In the event of an incident you could be held responsible and your insurance company would deal with any claim.

All Stalls and Pitches are let subject to availability.

This authority is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information across council services and with other bodies responsible for auditing or administering public funds for these purposes.

By signing below you are confirming that to the best of your knowledge the information provided is correct and that you have read and agree to abide by the attached Neston Market Traders Licence Terms and Conditions which, upon acceptance of your application by Neston Town Council, will form part of the resultant licence agreement.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Print name \_\_\_\_\_

<b>For office use only</b>			<b>Checked by</b>	<b>Copy taken</b>
Date application received:	Insurance policy number			
Comments:	Insurance expiry date			
	Pitch allocated			
	Lines approved			