

Bracknell Forest

Application for a street trading licence or consent Local Government (Miscellaneous Provisions) Act 1982

For help contact licence.all@bracknell-forest.gov.uk

Telephone: 01344 352000

* required information

Section 1 of 11			
You can save the form at any	time and resume it later. You do not need to be	logged in when you resume.	
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.	
Your reference	Ozzy's Kebabs	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.	
Are you an agent acting on b	ehalf of the applicant? No	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.	
Applicant Details			
* First name	Osman		
* Family name	Koc		
* E-mail			
Main telephone number		Include country code.	
Other telephone number			
☐ Indicate here if you would prefer not to be contacted by telephone			
Are you:			
Applying as a businessApplying as an individu	or organisation, including as a sole trader ual	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.	

Continued from marriage mace			
Continued from previous page			Address official correspondence should be
Your Address			sent to.
* Building number or name			
* Street			
District			
* City or town			
County or administrative area			
* Postcode			
* Country	United Kingdom		
- Country			-
Section 2 of 11			
FURTHER DETAILS ABOUT T	HE APPLICANT		
Former name(s)			If currently or previously known by any other name(s), you must record them here.
Home Address			
Is the address the same as (or	similar to) the address o	given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
	C No		required. Select "No" to enter a completely new set of details.
* Building number or name			
* Street	· 		
District	ř		
* City or town			
County or administrative are	а		
* Postcode			- 1
* Country			
Further Details		_	
* Date of birth	dd mm y	עעי	
* Place of birth	England		
National Insurance number			
Section 3 of 11			
DIRECTORS, PARTNERS, O	WNERS AND MANAGER	RS	

Continued from previous page	2
I is a partificiallib), OFFICE DE	fall COMPANY DIRECTORS and the SECRETARY (if the applicant is a company), all PARTNERS (if it ARERS (if it ARERS (if it IT) association), all OWNERS of the business or premises and all MANAGERS of It, including day-to-day MANAGERS OF THE PREMISES. Check for local guidance notes and by exact requirements.
* Are there any such people	for whom you need to provide details?
C Yes	No
Section 4 of 11	
TYPE OF APPLICATION	
Type of application:	
Specify the period for which the licence is required (if applicable)	14/05/2018
Section 5 of 11	
APPLICATION DETAILS	
Check for local guidance not to local circumstances or you	tes and conditions before completing this section. Some of the questions may not be relevant ur responses may have to provide very specific information
* Type of application?	
Street trading licence	C Street trading consent
* Trading name	Ozzy's Kebab
What You Want To Trade	
* List all the goods and service	es you want to offer for sale
Lamb Doner, Ckichen Shish I Doner Wraps (both Lamb an	Kebab, Chips, Onion Rings, Chicken Nuggets, Garlic Mushrooms, Mozzeler Sticks, Burgers, d Chicken), Soft drinks, Hot Drinks
* Does this include selling foo	od or drink?
Yes	C No
* Are you registered as a food	business?
(Yes	C No
* Local authority where you are registered	Bracknell Forest Council
* Registration number	
* Where will goods be stored	when not on sale?
At home in my garage, i have	fridges and freezers both in the garage and in the catering van
When You Want To Trade	
Proposed trading times for ea	ch day of the week (if applicable)

, a = 8 ⁵⁰

Continued from previous pag	C
* Day or days	7
* From	Monday to Sunday Time: 17:00 to 11:00
* To	Monday to Sunday Time: 17:00 to 11:00
	Add another day
Where You Want To Trad	e
* Type of trading	
Mobile	
Stationary	
* Street(s) / location(s) whe	ere you wish to trade
	eserve, off Sandhurst road, Crowthorne, Bracknell
Section 6 of 11	
DETAILS OF VEHICLE, ST	
* Will you be using a vehicl	le in connection with your work as a trader?
Yes	C No
Provide details of the vehic	tle
* Make	Citroen
* Model	Relay
* Colour	White
* Registration number	V278 JHJ
* Description of unit from	which you intend to trade, including dimensions
Mobile catering Van,	
Height 250 CM, Width 205	
* Where will the unit be st	ored when not in use?
Space 4U, 48-49 Longsho	t Ln
Section 7 of 11	
PUBLIC LIABILITY INSUF	RANCE
You must have a suitable	elevel of public liability insurance to cover this activity – check local requirements.
* Do you have public liab	pility insurance?
Yes	C No
Provide details of the po	licy

Continued from previous page	
* Insurance company	Mobilers Insurance
* Policy number	KOOX01
* Period of cover	1 year
* Amount of cover (£m)	10
Section 8 of 11	
PREVIOUS APPLICATIONS	
* Have you, or any person nam registration? (check all that ap	ned in or associated with this application, previously applied for a similar licence or ply)
⊠ No	Yes - application granted and revoked
Yes - application granted	Yes - application refused
Section 9 of 11	
CONVICTIONS	
* Have you, or any person nam	red in or associated with this application, been convicted of any crime or offence?
(Yes	No No
Section 10 of 11	
ADDITIONAL DETAILS	
	tion which is required or relevant to your application (check for local guidance notes and details of specific requirements in your area)
I have been given permission permission and consent.	by the sites management to open and operate to trade, i will attached it with this form the
Section 11 of 11	
PAYMENT DETAILS	
This fee must be paid to the au 1 week £132.00 1 month £354.00 1 month Ice Cream Trader £177	thority. If you complete the application online, you must pay it by debit or credit card. 7.00
* Fee amount (£)	354.00
ATTACHMENTS	
AUTHORITY POSTAL ADDRES	S

Continued from previous page			
Address			_
Building number or name			
Street			
District			
City or town			
County or administrative area			
Postcode	,		
Country	United Kingdom]
DECLARATION			
belief. This authority is under a duty provide as part of this application bodies responsible for audition brackhell-forest.gov.uk/nation	to protect the public for ation for the prevention ng and administering p onalfraudinitiative or con tes you have read and u	unds it administers, and and detection of fraud public funds for these pu intact Internal Audit on C understood the above de nless you answered "Yes	
* Full name	Osman k	LOC	
* Capacity	Owner	0	
Date (dd/mm/yyyy)	09/04/2	018 	
Once you're finished you need 1. Save this form to your comp 2. Go back to https://www.go continue with your applicatio Don't forget to make sure you	d to do the following: outer by clicking file/sav ov.uk/apply-for-a-licence n.	e/street-trading-licence/	e/bracknell-forest/apply-1 to upload this file and
Don't longer to make sure you	mave an your supporting		