APPENDIX A

PROOF OF IDENITY & RIGHT TO WORK

Photographic identification and proof of right to work is required for all applicants & partners. A passport (and appropriate visa where necessary) MUST be produced along with 2 of the following:

- Driving Licence
- Birth Certificate / Marriage Certificate
- Utility Bill / Bank statement
- National Insurance Number or any other form of identification the Council deems fit

Sole Limited Compan	Partnershi Other(pleas e specify)				
Business Name	MEAN BURGER				
Business Address	1				
	NT BEING APPLIED FOR: 3 months 1 month Weekly Daily				
Is the applicant trading a					
How long has the applicant been trading? CURRENT / PROPOSED TRADING SITES(s) - precise location(s) to be specified along with an acceptably prepared plan.					
Address of trading location	SLOUGH, FARNHAM ROAD ON LAYBY OPPOSITE POST OFFICE THE FIRM.				
Plan attached:	Yes No No				
Is trading taking place o	n private land? Yes No				
Has the owner's permis	sion been given? No No				

Mr	Mrs		Miss		Ms		Other Title	
Surname			1				First names	
Current a	ddress							
Post Town							Postcode	
Contact tel	lephone	number						
E-mail address								
 Utili 	ity Bill / E	Bank sta						
Utili Nati	ity Bill / E ional Ins	Bank sta urance l	tement Number o			identifi	cation the Council o	deems fit.
Utili Nati	ty Bill / E ional Ins	Bank sta urance l	tement Number o		ner form of	identifi	cation the Council o	deems fit.
Utili Nati	ity Bill / E ional Ins	Bank sta urance l	tement Number o			identifi		deems fit.
Utili Nati FIRST NO Mr Surname	ity Bill / Eional Ins	Bank sta urance l	tement Number o			identifi	Other Title	deems fit.
Utili Nati RIRST NO Mr Surname Date of bir	ty Bill / Eional Ins MINATE Mrs	Bank sta urance l	tement Number o			identifi	Other Title	deems fit.
• Utili • Nati FIRST NO Mr Burname Date of bin Current accepted	ty Bill / Eional Ins MINATE Mrs	Bank sta urance l	tement Number o			identifi	Other Title	deems fit.
Utili Nati RIRST NO Mr Surname Date of bir Current accepts Town	MINATE Mrs th	Bank sta urance I	tement Number of STANT Miss [identifi	Other Title First names	deems fit.
• Utili • Nati • Nati FIRST NO Mr Burname Date of bin Current according Post Town National Ins	MINATE Mrs Mrs ddress surance	Bank sta urance I ED ASSI	tement Number of STANT Miss [or any oth		identifi	Other Title First names	deems fit.
Utili National Institute National Institute National Institute	MINATE Mrs Mrs ddress surance	Bank sta urance I ED ASSI	tement Number of STANT Miss [or any oth		identifi	Other Title First names	deems fit.
• Utili • Nati • Nati • Nati • Nati FIRST NO Mr	MINATE Mrs Mrs Mrs Mrs Mrs	Bank sta urance I ED ASSI	SSISTAN	or any oth	Ms	identifi	Other Title First names Postcode	deems fit.

Current add	Iress				
Post Town				Postcode	
National Inst	urance Numbe	r			
THIRD NOM	MINATED ASS	SISTANT			
Mr	Mrs	Miss	Ms	Other Title	, , , , , , , , , , , , , , , , , , , ,
Surname		•		First names	
Date of birt	h				HE T
Current add	Iress				
Post Town				Postcode	
National Inst	ırance Numbe	r			
FOURTH N	OMINATED A	SSISTANT			
Mr	Mrs	Miss	Ms	Other Title	
Surname		·		First names	
Date of birt	h	A-100 (100 (100 (100 (100 (100 (100 (100			
Current add	Iress				
Post Town				Postcode	
National Ins	urance Numbe	r			
FIFTH NO	MINATED ASS	SISTANT			
Mr 📗	Mrs	Miss	Ms	Other Title	
Surname				First names	
Date of birt	h				
Current add	iress				
Post Town	T			Postcode	
National Ins	urance Numbe	r		1.00.0000	

Do the applicant(s) or nominated as current legal requirements? - Evidence		ave the necessary food safety training to meet e produced at time of application.
Yes No No		
REQUESTED TRADING TIMES (pl	ease use	24 hour clock).
Manager	tart time	Finish time
	00	23.00
Tuesday	00.	23.00
Wednesday \\	.00	23.00
Thursday	.00	23.00
Cuidou	1-00	23.00
October	1-00	23-00
Sunday	7.00	23.00
Seasonal Variations:		
Has the applicant been licensed with	h another	local authority?
Yes No 🗸		
If 'yes', please specify:		
	Trading C	Consent/Licence suspended or refused?
Yes No V		
If 'yes', please specify the Licensing	g Authority	y:
Does the applicant have the require produced at time of application.	d Public L	Liability Insurance (£5m)? - Evidence MUST be
Yes No No		
Full details of any vehicles, stall, trolley stand etc to be		TRAILER 10 FT. TO BE TRAILER USING
used in the course of trading.		VEHICLE. ORIGINAL COLOUR WHITE,
(Include registration/fleet number, height, width, length, colour)	TO BE STANDAL	JANOLUSTON, HUIH A OT DEGGANW IVINIV.
Description of goods / articles	FAST FO	DOD - PRIMARLY FRESH EXCELLENT QUALITY

to be sold.	MEAT	, 61	TAMACC	BEE	t Bul	GERS.	A	SMALL	10%
(E.g. hot / cold food, fruit and vegetables etc).	HOMEM		CHICKEN .		THER FOO SE	.00		BE VERY WILL	MULLUDE HIGH QUALITY
Address of premises or location where vehicle, stall, trolley, stand and any food will be stored when not in use.									

INSPECTION

The vehicle / stand / stall / trolley where trading is taking place must be inspected by a Licensing Officer prior to a Street Trading Consent being issued. Please contact the Licensing Office to arrange an inspection.

Please specify your preferred inspection location:	
Application Check List	
I have enclosed the completed application form. (New applicants will be required to submit 9 copies)	4
I have enclosed a plan of the site / location. (New applicants will be required to submit 9 copies)	1
I have enclosed the completed declaration of convictions & cautions for applicant(s) & nominated persons.	J
I have enclosed payment of fee.	1
I have enclosed the basic Criminal Record Bureau disclosure (if applicable) for applicant(s) and nominated persons.	
I have enclosed a passport size photograph of applicant(s) and nominated persons. (A digital image can be emailed to licensing@slough.gov.uk)	
I have enclosed proof of right to work for all applicant(s) and nominated persons.	
I have enclosed 2 additional forms of identification for each applicant & nominated persons.	
I have enclosed a copy of the Public Liability Insurance.	
I have enclosed Food Safety / Hygiene certificates for all nominated persons.	
I have enclosed a colour photograph of any vehicles, stall, trolley, stand etc. (A digital image can be emailed to licensing@slough.gov.uk)	[]
I understand that if I do not comply with the above requirements my application will be rejected.	1

Please note that digital images of the applicant, nominated persons and vehicle etc may be emailed to licensing@slough.gov.uk. Images should be named and referenced to your application.

TO BE COMPLETED BY ALL APPLICANTS

Please ensure that you have checked the application form fully before submission AND that you have read the revised – Street Trading Consents – General Conditions.

DECLARATION

The information contained in this form is correct to the best of my knowledge and belief. (It is an offence knowingly or recklessly to make a false statement. A person is to be treated as making a false statement if he/she produces, furnishes, signs or otherwise makes use of a document that contains a false statement)

Applicant Name:!	IOHSIN KAYANI	
Signed	Date	ed 21 07 16
Applicant Name:		
Signed:	Dated	l:
Applicant Name:		
Signed:	Dat	ed: