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APPLICATION FOR PERMIT TO RUN A BUSINESS ON COUNCIL LAND

Trading in Public Places

Full Name of Applicant _____

Postal Address _____

Telephone Number _____ Email _____

Business Name _____

Type of Proposed Service _____

Location/s where Business will be trading _____

Size of Occupied Area _____

Days/Date(s) of operations _____

Times _____

Dated the _____ day of _____ 20 _____

Signature of Applicant

Please attach the following information with the completed application form –

- Any further information to support your application
- Site Plan/aerial with the proposed locations marked clearly