# Application form to place tables and chairs within the limits of the highway for recreation or refreshment

Before completing, please read carefully the regulations that accompany this form.

**Note, we need a site location plan showing the location of tables and chairs and any additional structures in relation to the business frontage/ area applied for, before we can start processing your application.**

We will not begin to process your application until we have received all the relevant information.

## Applicant details

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| --- |
| First name: |
| Family name: |
| E-mail address: |
| Telephone number(s): |
| Business name: |
| Business address: |
| Your position in the business: |

## Location of the site to be occupied

|  |
| --- |
| Building or site address: |
| Width of footway if present: |
| Number of tables and chairs requested: |

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| Details of proposed use including identification of whether hot food is to be served and if serving of food/drink to the outdoor area will be by waiter/waitress service: |
| Details of the tables and chairs and any other structures (eg. barrier, parasol) proposed: |

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| Check that plan is returned showing dimensions of footways, carriageway, business frontage and area applied for: |

## Period of occupation

State when you want to occupy the road/highway (dd/mm/yyyy):

|  |  |
| --- | --- |
| Start date | End date: |

## Emergency contact details

|  |
| --- |
| Contact name: |
| Company/organisation: |
| 24 hour emergency telephone number: |

## Insurance

You must have a suitable level of public liability insurance to cover this activity. The minimum required is £5m. Please provide details of your policy.

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| Name on policy: |
| Insurance company: |
| Policy number: |
| Period of cover (end date): |
| Amount of cover (£m): |

## Additional information

Provide any additional information which is required or relevant to your application. Please check the terms & conditions for specific requirements.

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## Declaration

Please read the terms & conditions before signing this application.

I am aware of the provisions of the Highways Act 1980. I have read and agree to the conditions listed in South Gloucestershire Council's Terms & Conditions, and will not occupy the highway until permission is given. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.

|  |  |
| --- | --- |
| Signed: | Print full name: |
| Position: | Date (dd/mm/yyyy): |

## Contact us

Please return this paperwork by email to: TechSupportStreetcareBMR@southglos.gov.uk

### Or by post to the following address:

|  |  |
| --- | --- |
| **South Gloucestershire CouncilDepartment for Place**StreetcarePO Box 1954BristolBS37 0DD | T: + 44 (0)1454 865859W: [www.southglos.gov.uk](https://www.southglos.gov.uk/)  |