



**Buckinghamshire**  
**Application for a street trading licence or consent**

For help contact  
[Licensing@buckinghamshire.gov.uk](mailto:Licensing@buckinghamshire.gov.uk)  
 Telephone:

\* 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	Street Trading License	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 behalf of the applicant?

- Yes
  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	Muhammad
Family name	Hotak
E-mail address	[REDACTED]
Main telephone number	[REDACTED]
Other telephone number	

Include country code.

Indicate here if you would prefer not to be contacted by telephone

Are you:

- Applying as a business or organisation, including as a sole trader  
 Applying as an individual

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.

**Applicant Business**

- Is your business registered in the UK with Companies House?
  Yes
  No
- Is your business registered outside the UK?
  Yes
  No

Business name	Amersham Kebabs
VAT number	- none
Legal status	Sole Trader

If your business is registered, use its registered name.

Put "none" if you are not registered for VAT.

Continued from previous page...

Your position in the business

Home country

The country where the headquarters of your business is located.

**Business Address**

If you have one, this should be your official address - that is an address required of you by law for receiving communications.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

**Section 2 of 11**

**FURTHER DETAILS ABOUT THE 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 given in section one?

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

Yes  No

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

**Further Details**

Date of birth  /  /   
dd mm yyyy

Place of birth

National Insurance number

**Section 3 of 11**

**DIRECTORS, PARTNERS, OWNERS AND MANAGERS**

**Continued from previous page...**

You must provide details of all COMPANY DIRECTORS and the SECRETARY (if the applicant is a company), all PARTNERS (if it is a partnership), OFFICE BEARERS (if it is a club or association), all OWNERS of the business or premises and all MANAGERS of the business or organisation, including day-to-day MANAGERS OF THE PREMISES. Check for local guidance notes and conditions which may clarify exact requirements.

Are there any such people for whom you need to provide details?

- Yes  No

**Section 4 of 11**

**TYPE OF APPLICATION**

Type of application:  New  Renewal  Temporary

Specify the period for which the licence is required (if applicable)

**Section 5 of 11**

**APPLICATION DETAILS**

Check for local guidance notes and conditions before completing this section. Some of the questions may not be relevant to local circumstances or your responses may have to provide very specific information

Type of application?

- Street trading licence  Street trading consent

Trading name

**What You Want To Trade**

List all the goods and services you want to offer for sale

Does this include selling food or drink?

- Yes  No

Are you registered as a food business?

- Yes  No

Where will goods be stored when not on sale?

**When You Want To Trade**

Proposed trading times for each day of the week (if applicable)

Day or days

From

To

*Continued from previous page...*

Day or days	<input type="text" value="Tuesday"/>
From	<input type="text" value="13:00"/>
To	<input type="text" value="23:00"/>
<input type="button" value="Remove this day"/>	

Day or days	<input type="text" value="Wednesday"/>
From	<input type="text" value="13:00"/>
To	<input type="text" value="23:00"/>
<input type="button" value="Remove this day"/>	

Day or days	<input type="text" value="Thursday"/>
From	<input type="text" value="13:00"/>
To	<input type="text" value="23:00"/>
<input type="button" value="Remove this day"/>	

Day or days	<input type="text" value="Friday"/>
From	<input type="text" value="13:00"/>
To	<input type="text" value="23:00"/>
<input type="button" value="Remove this day"/>	

Day or days	<input type="text" value="Saturday"/>
From	<input type="text" value="13:00"/>
To	<input type="text" value="23:00"/>
<input type="button" value="Remove this day"/>	

Day or days	<input type="text" value="Sunday"/>
From	<input type="text" value="13:00"/>
To	<input type="text" value="23:00"/>
<input type="button" value="Remove this day"/>	

**Where You Want To Trade**

Type of trading

Mobile

Continued from previous page...

Stationary

Street(s) / location(s) where you wish to trade

The Broadway Old Amersham

### Section 6 of 11

#### DETAILS OF VEHICLE, STALL AND/OR CONTAINER

Will you be using a vehicle in connection with your work as a trader?

Yes  No

Description of unit from which you intend to trade, including dimensions

its a unit of about 6 metres

Where will the unit be stored when not in use?

Outside my Home Address, [REDACTED] Amersham HP7 [REDACTED]

### Section 7 of 11

#### PUBLIC LIABILITY INSURANCE

You must have a suitable level of public liability insurance to cover this activity – check local requirements.

Do you have public liability insurance?

Yes  No

Provide details of the policy

Insurance company

Policy number

Period of cover

Amount of cover (£m)

### Section 8 of 11

#### PREVIOUS APPLICATIONS

Have you, or any person named in or associated with this application, previously applied for a similar licence or registration? (check all that apply)

No  Yes - application granted and revoked

Yes - application granted  Yes - application refused

### Section 9 of 11

#### CONVICTIONS

**Continued from previous page...**

Have you, or any person named in or associated with this application, been convicted of any crime or offence?

Yes  No

### Section 10 of 11

#### ADDITIONAL DETAILS

Provide any additional information which is required or relevant to your application (check for local guidance notes and conditions which may provide details of specific requirements in your area)

I would like to sell Kebabs, Burgers, Donors, Chicken, soft drinks like Coke, Fanta ETC  
i would like to start my buisness in a small Food van  
i have got an insurance as well  
Thanks

### Section 11 of 11

#### DECLARATION

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

Full name

Capacity

Date  /  /   
dd mm yyyy

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/street-trading-licence/buckinghamshire/apply-1> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

**OFFICE USE ONLY**

Applicant reference number	<input type="text" value="Street Trading License"/>
Fee paid	<input type="text"/>
Payment provider reference	<input type="text"/>
ELMS Payment Reference	<input type="text"/>
Payment status	<input type="text"/>
Payment authorisation code	<input type="text"/>
Payment authorisation date	<input type="text"/>
Date and time submitted	<input type="text"/>
Approval deadline	<input type="text"/>
Error message	<input type="text"/>
Is Digitally signed	<input type="checkbox"/>