

APPLICATION TO SELL FOODSTUFF

MARKET: BEDALE ON TUESDAY

TRADING NAME:
FULL NAME:
ADDRESS:
 TEL NUMBER (S):
NATURE OF BUSINESS:
NAME OF LOCAL AUTHORITY WITH WHICH BUSINESS IS REGISTERED:

NOTE: All food traders must provide proof of registration as a food business with this application. You may do this by attaching a copy of your registration form, or by providing the reference information of your registration. If you are not registered, please contact your own Local authority for guidance.

CONTACT TEL NO:..... SIGNED: DATE:

Please return this completed form to the Market Superintendent

DFFICE USE ONLY: EHO dealing with application:	
Date checked:	
Remarks:	