

**COMHAIRLE CONTAE ATHA CLIATH THEAS**

# SOUTH DUBLIN COUNTY COUNCIL

**APPLICATION FORM FOR A CASUAL TRADING LICENCE**

### Casual Trading Act, 1995

# Casual Trading Bye-Laws 2016

## PLEASE READ THE BYE-LAWS BEFORE COMPLETING THIS FORM

**PLEASE COMPLETE IN BLOCK CAPITALS**

1. **Name of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Full Postal Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(a) PPS No. (In the case of an individual) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Tax Reference No. (In the case of a company/business/sole trader):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Company Registration Number, as supplied by the Companies Registration Office**

**(If the application is in the name of a company/business/sole trader): \_\_\_\_\_\_\_\_\_\_\_**

1. **Intended Casual Trading Area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **First date on which it is intended to engage in Casual Trading: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Description of the goods to be sold:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Date registered with HSE for sale of foodstuffs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HSE No. :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Insurance held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **If you were a holder of a previous Casual Trading Licence please quote the following:**

**Licence Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**To South Dublin County Council**

**1**

**I DECLARE ---**

1. **that I have not been convicted of two or more offences under the Casual Trading Act, 1995, within three years prior to the date on which I intend to commence casual trading.**
2. **that the foregoing particulars are correct and I enclose a cheque/bank-draft/postal-order/money order for €\_\_\_\_\_\_\_\_\_\_ being the fee fixed under bye-law by South Dublin County Council under Section 6 of the Casual Trading Act, 1995.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Print Name

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date

Section 4(11) of the Casual Trading Act, 1995, provides that the local authority concerned shall notify the Minister for Social Welfare of the name and address of a person to whom a casual trading licence was granted and the conditions of the licence and Section 4(2A) of the Casual Trading Act, 1995 (inserted by Section 141 of the Finance Act, 1996 (No.9 of 1996)) provides that the local authority concerned shall notify the Revenue Commissioners of the name, address and tax reference number of a person to whom a casual trading licence was granted and the conditions of the licence. Section 13 of the Casual Trading Act, 1995, also provides that a local authority may establish and maintain the Register of Casual Trading Licences on computer. In such circumstances, personal data kept in the register is subject to the requirements of the Data Protection Act, 1988 (No. 25 of 1988) including an individual’s right of access to and verification of data, where appropriate.

**PLEASE ENSURE THAT YOU HAVE INCLUDED THE FOLLOWING DOCUMENTATION WITH APPLICATION FORM. INCOMPLETE APPLICATIONS WILL BE DEEMED INVALID AND RETURNED.**

**2**

Have you included?

2 Passport photos of the applicant

Proof of identify (passport/ driving licence)

Copy of public liability insurance policy of at least €2.6 million. Please note that should you be granted a Licence, you will be required to provide a specific indemnity to South Dublin County Council on the policy.

If you wish to nominate an agent(s), you must supply the name, PPS

number and photograph of the agent(s).

In the case of application for Licence to sell food, copy of letter of registration with the HSE

A photograph of the stall to be used

A valid tax clearance cert

Appropriate fee

**3**