

**PD BOUNDARY WALK GRAND OPENING
STALLHOLDER APPLICATION FORM**



Please complete this form and return with your payment by 31st May 2017 to:

Buxton Town Team c/o 22 West Rd Buxton SK17 6HF

OR you can drop it into the Buxton Town Team mailbox by Reception in Buxton Town Hall during working hours

OR if you are paying by BACS, you can email it to townteam@buxtontownteam.org For queries email or call 01298 71041

| | | | |
|---|---|---|--|
| Name of Company or Organisation | | Reg. Charity N ^o (if applicable) | |
| Name of Main Contact | | | |
| Home Address | | | Post Code: |
| Business Address (if different) | | | Post Code: |
| Telephone Numbers | Land Line: | Mobile: | |
| Email Address | | | |
| What do you want to do on your stall? Please list everything. | | | |
| Space and stalls required Space is at a premium. You will only be allocated the space you book and pay for. You will not be able to park a vehicle alongside except by special arrangement in advance - contact us to discuss. | How many market stalls do you want us to provide? | | Total cost at £20 each: £ |
| | Do you want space to erect your own equipment or gazebo? (contact us for a price if you need more than 3m x 3m) | | Cost for up to 3m x 3m: £ 30 |
| | Do you want to bring a specialist trading vehicle? If yes please indicate size: Vehicle Registration Number: _____ Vehicle Insurance Provider: _____ Policy Number: _____ Expiry Date: _____ | | Cost for vehicle up to 5m: £ 30 (contact us if your vehicle is longer) |
| | Will you be selling Food? | | |
| | If Yes - Local Authority you are registered with: - Date of last inspection: - Food Hygiene Rating: | | |
| Public & Product Liability Insurance (required to £5million) | Provider: | Policy Number: | Expiry Date: |
| Do you want Electricity (NB additional cost is £10) | If Yes: list all the electrical items you want to connect and their wattage | | You are responsible for providing adequate fire fighting equipment on your stall |
| Will you be using bottled gas? | If Yes: GasSafe Registration: | | |
| Your Website Address | Twitter Name | | |
| Face Book Page | | | |
| I confirm that the above information is correct and complete. | | Signature: | Date: |