

**City of York Council**

**Newgate Market**  
**Casual Trader Application**

**ABOUT YOU:**

Mr.  Mrs.  Miss  Ms  Other Title  (please tick)

Surname: \_\_\_\_\_

Vehicle Reg. No: \_\_\_\_\_

Other Names: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile No: \_\_\_\_\_

\_\_\_\_\_

Tel. No: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

List any others Markets you have traded at in the last 12 months? \_\_\_\_\_

Are you an Undischarged Bankrupt or are there any Court debts outstanding against you? \_\_\_\_\_

**YOUR COMMODITY:**

What do you wish to sell at York Newgate Market ? \_\_\_\_\_

**YOUR INSURANCE:**

*N.B. It is a condition of standing Newgate Market that you hold valid Public Liability Insurance.*

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Address: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

\_\_\_\_\_

Cover Sum: £ \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICE USE**

Application Received: \_\_\_\_\_

Signature: \_\_\_\_\_

First Day Trading: \_\_\_\_\_

Stall Number: \_\_\_\_\_