



New Market Trader Application Form

Reference No.

Personal Details

Trading / Business Name

Contact Name

Address

Postcode

Telephone Number

Mobile Number

Email

Website

Date of Birth

Are you required to have a permit to work in the UK? YES [] NO []

If so, do you have a permit to work? YES [] NO []

National Insurance Number

Insurance Details (please provide a copy of your insurance documents with this application)

Insurance company

Date of expiry

Goods

Please provide a full description of goods to be sold:
Please include photographs if possible

Where would you like to trade?

- Tuesday Newmarket
 Wednesday Bury St Edmunds
 Thursday Brandon
 Friday Haverhill / Mildenhall
 Saturday Bury St Edmunds / Haverhill / Newmarket / Brandon

Preferred start date:

Registration Details (Traders selling food only)

Details of Local Authority
where your business is
registered

Name

Address

Do members of staff have a food hygiene training certificate?

If yes please submit a copy

Stall details

Type of stall you will be using: Gazebo / Free standing trailer / vehicle / other

Size of stall:

Do you require power? (extra charges apply) YES NO

If so please list the items you will be bringing:

Declaration: I hereby certify that the information I have provided is correct.

Signed:

Date:

Return to:

Sharon Fairweather, Market Development Officer,
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