

**EAST AYRSHIRE COUNCIL
CIVIC GOVERNMENT (SCOTLAND) ACT 1982**

Application for Grant/Renewal of a Window Cleaner's Licence

Please complete in block capitals				
1	To be completed if a natural person	Surname	First Names(s)	
(a)	Full name of applicant Maiden Name National Insurance No Please state your Nationality Do you have the right to work legally in the UK? Please note that you may be asked to provide your Home Office documents and/or Passport			
(b)	Home Address, including postcode Contact Telephone Number Home/Mobile Email address			
(c)	Age, Date of Birth and Place of Birth	Age	DOB	Place of Birth
(d)	Give name and address of person, company or firm, employing you to trade. If self-employed, please state trading name and contact telephone number.			
(e)	Details of Licence applied for:- Grant / Renewal Main Operator (3 years) or Employee (1 year) or (3 years) Go to Q3			
2	To be completed if not a natural person			
(a)	Full Name of Company/Partnership			
(b)	Address of Registered or Principal Office			

<p>(c)</p>	<p>Full name, address, date of birth and place of birth of all Directors, Company Secretary, Partners or other persons responsible for its management (continue on a separate sheet if necessary)</p> <p>Also give contact Telephone No of Principal Director – Home/Business/Mobile</p>	
<p>(d)</p>	<p>Full name, address, date of birth and place of birth of any employee or agent who is to carry on the day-to-day management of the activity in relation to which the application is made.</p>	
<p>3</p>	<p>State localities within East Ayrshire in which you propose to operate</p> <p>(any licence granted will permit trading in Wards 1-9)</p>	
<p>4</p>	<p>Give details of Public Liability Insurance – company name, policy number and expiry date</p> <p>(copy of insurance policy MUST accompany this application)</p>	
<p>5</p>	<p>Give details of Employers Liability Insurance (if relevant) – company name, policy number and expiry date</p> <p>(if relevant, copy of insurance policy MUST accompany this application)</p>	
<p>6</p>	<p>Do you suffer from any disability or illness likely to affect your fitness as a window cleaner.</p> <p>If yes, please give details</p>	<p>Yes/No</p>

SCHEDULE OF DETAILS OF CONVICTIONS

7 Give details of all convictions for which a Court has imposed a sentence on you. Failure to disclose convictions may lead to a refusal to grant a Licence. Also include details of any **fixed penalties** imposed. Continue on a separate sheet if necessary.

If the applicant is a limited company or partnership, details of convictions of all parties specified in the application for are required.

If you have not been convicted by a Court or received any fixed penalties write "**NONE**".

If you are in doubt about your answer, consult your Solicitor for advice.

Note: As of 29th March, 2003 the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions)(Scotland) Order 2003 requires that applicants for **Taxi and Private Hire Car and Driver Licences** must declare all previous convictions both **spent** and **unspent**.

DATE OF OFFENCE	DATE OF CONVICTION	NAME & PLACE OF COURT	NATURE OF OFFENCE	PENALTY/SENTENCE IMPOSED

8 a	Have you or any person named on this form previously held or currently hold a Window Cleaner's Licence?	YES/NO
	If yes, when was the licence granted?	
	When does/did it expire?	
	Which authority granted the licence?	

