EAST AYRSHIRE COUNCIL
CIVIC GOVERNMENT (SCOTLAND) ACT 1982

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

	Please complete form in block capitals and start at either Q1 or Q2	
1 (a)	**To be completed if a natural person** 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	Surname First Names(s)
(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 (a)	**To be completed if not a natural person** Full Name of Company/Partnership	
(b)	Address of Registered or Principal Office	

(c)	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) Also give contact Telephone No of Principal Director – Home/Business/Mobile	
(d)	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.	
3	State localities within East Ayrshire in which you propose to operate (any licence granted will permit trading in Wards 1-9)	
4	Give details of Public Liability Insurance held – A copy of the Policy Schedule showing the required information must accompany this application. If not possible, all relevant details must be provided. Applicants are reminded that it is condition of the licence that insurance cover of at least £500,000 must be held during the term of a licence	(1) Insurance Company name (2) Policy Number (3) Insured's name (4) Business Activity (5) Level of Cover (6) Type of cover held (eg Public Liability) (7) Dates Covered
5	Give details of Employers Liability Insurance (if relevant) – A copy of the Policy Schedule must accompany this application. If not possible, all relevant details must be provided. Employers are reminded that they are responsible for ensuring employers liability cover must be held during the term of any licence held by employee(s)	(1) Insurance Company name (2) Policy Number (3) Insured's name (4) Business Activity (5) Level of Cover (6) Type of cover held (eg Public Liability) (7) Dates Covered (8) Number of employees

6	Do you suffer from any disability or illness likely to affect your fitness as a window cleaner. If yes, please give details	Yes/No

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 form 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 14th February 2013 the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions)(Scotland) Order 2013 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?	
b	Have you or any person named on this form ever been refused a Window Cleaner's Licence?	YES/NO
	If yes, which authority refused the licence?	
	When was it refused?	

I declare that the particulars given by me on this form are correct to the best of my knowledge and belief. I enclose £ in payment of the appropriate fee.

(Signature or applicant or agent) ……

(Agents Address) ……

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(Position of applicant in Company/ Partnership if not otherwise stated)

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Date ……

National Fraud Initiative - East Ayrshire Council is under a duty to protect the public funds it administers, and to this end may use the information you provide on this form for the prevention and detection of fraud. It may also share this data with other bodies including government organisations for these purposes. Further information can be obtained from the council's website.

NB Any person who in or in connection with the making of this application makes any statement which he/she knows to be false or recklessly makes any statement which is false in a material particular shall be guilty of an offence and liable, on summary conviction, to a fine not exceeding level 4 on the standard scale.

All Employees or Agents acting as window cleaners require individually a Window Cleaner's Licence

Please note that the application fee is non-refundable once the application is processed.