Mobile



dlr, Marine Road, Dún Laoghaire, Co. Dublin A96K6C9 Information: 01 2054700 Email: streetfurniturelicencing@dlrcoco.ie I wish to apply for a new licence (please tick) I wish to apply for a renewal licence (please tick) Note: For renewal of a Street Furniture Licence Should there be any changes to the street furniture items placed in the existing licenced area, or to the meter sq. area sought under the Street Furniture Licence, a new licence application must be submitted. **APPLICANT DETAILS** PLEASE USE BLOCK CAPITALS Name Email Landline Mobile Address **DETAILS OF BUSINESS / PREMISES Business Trading Name** Business address (if different from above) Registered Company name **REGISTERED OWNER OF COMPANY** Name Address Email



WHERE NOTIFICATIONS ARE TO BE SENT PLEASE USE BLOCK CAPITALS	
Name	
Email	
Address	
PROPOSED LICENSE AREA	
PROPOSED LICENCE AREA	
Length (m)  Area (m²)	
Width (m)	
No. of Chaire	
No. of Chairs  No. of Tables	
Table Dimensions	
Description of canvas screen(s) to be used	
Any other appliances, apparatus or structures to be used	
Proposed Days and Hours of Operation	
Name of Insurance Company	
Policy No.	
Expiry Date	



CALCULATION OF LICE	LINCE I LL/ SPACE RE	MIAL CHARGE		
Number of tables	No. of Tables x €12	25 per table	€	
DECLARATION				
DECLARATION				
I confirm that all the above in exempt me from the provision pavement are not permitted Laoghaire-Rathdown County	ons of any other Legislation. I at any time under the cond	I am aware that adve	ertising boards on the public	
I have been notified that bre suspended or revoked.	eaches of the Conditions of t	his Licence may lead t	to this Licence being	
I have read and agree to abide and by any specific condition Council.	, -			
I agree to pay the Licence fe Rathdown County Council of			tification by Dún Laoghaire-	
PRINT NAME	Applicant	Amt paid by Appl	icant €	
		рала 2) төрг		
Signature	Applicant	Date		



Checklist for New Licence Application	Please tick
Pre-Application Consultation	
Copy of Notice of Intention to Place Street Furniture	
Completed Application Form	
Outline Drawing	
Checklist for Renewal of Current Licence	Please tick
Completed Application Form  Copy of Insurance Policy (indemnifying dlrcoco 6.5M)	
Licence Application Number / CRM	Date received
Application Fee Receipt Number	OFFICE USE ONLY
Licence Fee / Space Rental Charge Receipt Number	OFFICE USE ONLY
Signature Form checked by	Date