

# MEDWAY COUNCIL ACT 2001

## DEALERS IN SECOND-HAND GOODS



### REGISTRATION FORM FOR "NEW APPLICATIONS"

"Before Completion Please See Notes on Reverse"

Please use **BLOCK LETTERS**

#### SECTION ONE - TO BE COMPLETED BY ALL APPLICANTS

For amendments to existing registrations or replacement of lost or stolen certificates, please give existing registration number:

1. Business/trading name (if any):
2. Business/trading address (if any): *Note: A separate registration is required for every address*

Post Code:

Tel No:

- 3 Business description (i.e. Antiques, Motor, General, etc):
4. If no fixed trading address please state usual place(s) of business (eg bootfairs, markets):

#### SECTION TWO - TO BE COMPLETED IF BUSINESS IS A LIMITED COMPANY

1. What is the full title of the company:
2. What is the address of the Registered Office:
3. Address for correspondence (if different):

#### SECTION THREE - TO BE COMPLETED IF NOT A LIMITED COMPANY *(Note: private addresses will not be stated on registration certificate)*

1. Please provide the following details of ownership:-

Full name of owner (including all forenames):

Date of Birth:

Address:

Post Code:

2. Are there any partners in the business:

YES

NO

3. If "YES" please provide details of all partners on the reverse of this form.

#### SECTION FOUR - TO BE COMPLETED BY ALL APPLICANTS

I have read and understood the information provided. I can confirm that a similar application has not been made to Medway Council. (Single application covers both areas)

Signed: **Owner / Director / Secretary**(please delete as appropriate)

Full Name of person signing application:

Date: Contact Tel No (in case of any queries):

Completed forms to be sent to Trading Standards, Gun Wharf, Dock Road, Chatham, Kent ME4 4TR

Fax: 01634 332006

e-mail: [consumer.protection@medway.gov.uk](mailto:consumer.protection@medway.gov.uk)

website: [www.medway.gov.uk](http://www.medway.gov.uk)

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## DETAILS OF PARTNERS :-

1)

Full name of owner (including all forenames):

Date of Birth:

Address:

Post Code:

2)

Full name of owner (including all forenames):

Date of Birth:

Address:

Post Code:

3)

Full name of owner (including all forenames):

Date of Birth:

Address:

Post Code:

4)

Full name of owner (including all forenames):

Date of Birth:

Address:

Post Code:

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## NOTES TO ASSIST IN THE COMPLETION OF THIS FORM :-

### Section One

1. Only enter details of a trading name (e.g. Brown's Antiques). If you trade in your own name or as a Limited Company, please leave blank.
2. Please note that a separate registration is required for each business premises that you wish to register. Please remember to enter your postcode. Do not enter addresses outside of Kent.

### Section Three

3. We need a contact address in relation to each partner. Private addresses will not be shown on certificates. A business address, a PO Box number used by the business, or any address where post will be accepted on behalf of the owner(s) will be acceptable.

### Data Protection Act 1998

This legislation was promoted in partnership with Kent County Council and Kent Police, and for the purpose of ensuring that the provisions of the Act are complied with, registration information is held on a secure database to which only these enforcement agencies have access.

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