

# West Oxfordshire District Council

## Your receipt - Application for a Pavement Licence

WOD\_PAVLIC\_00108131

[Visit the West Oxfordshire District Council website.](#)

<b>Application type</b>	APPLY
<b>Submission date</b>	2023-10-02 19:01:23.000
<b>Licence cost</b>	£0.00
<b>Licence cost</b>	£100 (to be paid by West Oxfordshire District Council for 2023-2024)
<b>Application reference number</b>	WOD_PAVLIC_00108131
<b>Trading name</b>	Gail's
<b>Licence cost</b>	£0.00
<b>Licence cost</b>	£100 (to be paid by West Oxfordshire District Council for 2023-2024)
<b>Applicant address</b>	
<b>Applicant UPRN</b>	100121320253
<b>Applicant telephone</b>	
<b>Applicant email</b>	
<b>Premises address</b>	17 Market Square, Witney, Oxfordshire, OX28 6AB
<b>Premises telephone number</b>	02073578000
<b>Business premises use</b>	Other use for the sale of food or drink for consumption on or off the premises
<b>Description of the area</b>	Pavement area immediately outside front of 17 Market Square
<b>Monday start time</b>	07:00
<b>Tuesday start time</b>	07:00
<b>Wednesday start time</b>	07:00
<b>Thursday start time</b>	07:00
<b>Friday start time</b>	07:00
<b>Saturday start time</b>	07:00
<b>Sunday start time</b>	07:00
<b>Monday finish time</b>	19:00
<b>Tuesday finish time</b>	19:00
<b>Wednesday finish time</b>	19:00
<b>Thursday finish time</b>	19:00
<b>Friday finish time</b>	19:00
<b>Saturday finish time</b>	19:00
<b>Sunday finish time</b>	19:00
<b>Furniture purpose</b>	For the purpose of consuming food or drink
<b>Description of the furniture</b>	13 tables, 26 chairs, 6 barriers, 1 A board
<b>Do you intend to alter any of the building and / or frontage to accommodate this proposal?</b>	No
<b>Correspondence title</b>	Mr
<b>Correspondence first name</b>	James
<b>Correspondence last name</b>	Baker

**Correspondence telephone**

**Correspondence email**

**Correspondence address**

**Uploaded file 01** Witney.png

**Uploaded file 02** Gails\_Liability\_Insurance.pdf

**Uploaded file 03** Gails\_Furniture.png

**Uploaded files** 3

**I agree - the above declaration is correct** true

**Licence will expire** undefined

**Correspondence address** 148 Tooley Street, London, SE1 2TU

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**Contact details submitted**

**Name** Mr Gail's Ltd

**Address**

**Email**

**Phone**

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Thank you for submitting your application. We will contact you about this ....