

# APPLICATION TO TRADE DARLEY STREET MARKET

## Section A – About You (This section is not scored)

This section is the information relating to the person(s) submitting the application. If it is a joint application, then both parties must complete this section.

Details	Applicant (1)		Applicant (2)	
<b>Title</b> (Mr, Mrs, Miss, Ms, Mx, Other)				
<b>Forename(s)</b>				
<b>Surname</b>				
<b>House No</b>				
<b>Street</b>				
<b>Town/City</b>				
<b>Postcode</b>				
<b>Tel: (Home)</b>				
<b>Tel: (Mobile)</b>				
<b>Email address</b>				
<b>Previous Address</b> (If less than 3 years at present address)				
<b>Under the requirements of the Asylum and Immigration Act, are you currently eligible to work in the UK?</b>	<b>YES/NO:</b>		<b>YES/NO:</b>	

## Section B – Unit(s) Application (This section is not scored)

This section relates to the unit(s) you are applying for. You should refer to the floor plan and quote the unit no(s) as shown on the plan.

<b>Please state the Unit No(s) you are applying for</b>	<b>1<sup>st</sup> preference</b>	<b>Unit No(s)</b>	
	<b>2<sup>nd</sup> preference</b>	<b>Unit No(s)</b>	
	<b>3<sup>rd</sup> preference</b>	<b>Unit No(s)</b>	

**Section C – About your Business (This section is not scored)**

This section relates to your business proposal.

<b>Is this an existing business?</b>	<b>YES</b>		<b>NO</b> (If No , skip to Section D)	
<b>How many years has the business been trading?</b>		16	<b>Name of Business</b>	
<b>Is the Business owned by the Applicant(s)?</b>	<b>YES/NO</b>			
<b>If No, please list all owners/partners</b>				
<b>Business Address</b>	<b>Street</b>			
	<b>Town/City</b>			
	<b>Post Code</b>			
<b>Contact Telephone Number</b>		21	<b>Email address</b>	
<b>Website Address</b>				

**Section D – Staff Information (This section is not scored)**

This section is about your staff that will be employed by your business. New businesses that have limited retail experience should demonstrate how they are to develop an expertise in this products/services they are providing.

<b>Will you be employing staff?</b>	<b>YES</b>		<b>No</b> (if no go to section E )	
<b>How many employees will you have?</b>	<b>Full time (37 hours or more)</b>		<b>Part time</b>	
<b>Please describe the formal training each staff member will receive?</b>				
<b>Please describe the product/services knowledge that each staff will obtain?</b>				

**Section E – Credit Reference (This section is either a PASS or FAIL)**

**CREDIT REFERENCE CONSENT FORM**

We will obtain information about you from a credit reference agency and Council records to check your credit status and identity. The agency will record our enquiries which may be seen by other companies who make their own credit enquiries. We may use credit scoring.

I understand that public funds must be protected and so the information I have provided may be used to prevent and detect fraud. The information may be used by the Council for checking other records held by the Council and may also be shared, for the same purposes, with other organisations which handle public funds

I/We hereby give my/our consent for Bradford Council Markets Service to apply for a personal Credit Reference in respect of my application.

<b>Applicant 1</b>	<b>Name</b>	
	<b>Signature</b>	
<b>Date of Birth:</b>		
<b>Address (If at address less than 3 years please advise of your previous address)</b>		
<b>Applicant 2</b>	<b>Name</b>	
	<b>Signature</b>	
<b>Date of Birth:</b>		
<b>Address (If at address less than 3 years please advise of your previous address)</b>		

**Section F – About your Products or Services (This section is worth a maximum of 120 points)**

This section relates to your products or services. It is advisable to provide any leaflets, images or photographic evidence of your products / services, including any customer endorsements.

1	Please provide a <b>DETAILED LIST</b> of the different products and/or services you wish to offer	
2	In one sentence how would you describe the core offer of your business?	
3	What sets you and your business apart from your competitors?	
4	How will your business benefit the market and inspire new customers to shop in the market?	
5	If you intend to offer cashless payments, please describe how you would do this	
6	What is your approach to establishing whether there is enough customer demand for your products and/or services?	
7	Please describe your product returns policy?	
8	Please describe your customer complaints policy and how you ensure any customer complaints are resolved satisfactory	
9	What are the current or future threats to your business and how will you address these?	

**Section G – Your Skills & Experience (This section is worth a maximum of 50 points)**

This section is about the Applicant(s) expertise in the products or services they are proposing to offer.

10	Please provide details of your previous and current experience, qualifications that is relevant to your business	
11	Please outline any formal training that you have undertaken in the last five years that is relevant to your business	

**Section H – About your Marketing & Promotional Activities (This section is worth a maximum of 80 points)**

12	Provide examples of the types of marketing activities you will use to promote your business	
13	Please describe the key promotional activities that you intend to use to attract those customers that may not typically visit the market	
14	If you have an online sales presence, how do you promote this?	
15	Do you currently offer a home delivery service or intend to offer one in the future? What do you think are the barriers in providing such a service?	
16	Please enter the online/ social media sites used to promote your business	
17	And the numbers of followers for each site	

**Section I – About your Shop Fitting Works (This section is worth a maximum of 40 points)**

18	What is your maximum budget for investing in the unit(s) you have applied for?	£
19	Please describe the type of work that you intend to carry out	
20	Referring to the Tenants' Design Guide, please describe how you intend the unit(s) to look and the type of fixtures/fittings that you will use	

**Section J – About your Sustainability (This section is worth a maximum of 40 points)**

21	Please describe how you will reduce your non-essential packaging	
22	What methods can you use in your business to encourage your customers to reuse and recycle?	
23	Please describe the methods you will use to reduce, recycle or eliminate your business waste	
24	What % of your product are purchased locally i.e. within 20 miles from Bradford District?	
25	Please describe the sustainable practices you will adopt as part of your shop fitting works	

**Section K – Healthy Foods (This section is worth a maximum of 40 points)**

26	Does your application involve the sale of hot foods?	YES/NO (if no go to Section L)
27	Have you registered your food business?	
28	If your business has received a food hygiene inspection please confirm your current food hygiene ratings score?	
29	<p>We expect all tenants to follow our vision of good food in Bradford District. This vision is;</p> <p><i>“To put easily accessible and nutritious food for all at the heart of Bradford’s policies and actions. We do this in order to reduce health and social inequalities, to improve health and wellbeing and to create a secure and sustainable food system that works for people and strengthens our local economy”</i></p> <p>Please explain how your business can help contribute towards our good food vision?</p>	
30	<p>The Healthy Markets Charter will aim to contribute towards our ongoing goal of tackling obesity in the Bradford district. Obesity is one of the biggest health problems this district faces. Over 40% of children in Bradford are obese or overweight by the time they leave primary school, and that rises to 65% of adults. Individuals who are obese in their early years are more likely to become obese adults, putting them at a higher risk of ill-health, such as heart disease, type 2 diabetes, several types of cancer and fatty liver disease, and premature death.</p> <p>As such there will be an expectation that market traders contribute towards reducing their use of ‘High Fat, Sugar and Salt’.</p> <p>Please describe how your business can meet the goals of our charter and consumer demand for healthier foods, particularly around less fat, sugar and salt in your menu.</p>	

**Section L – Supporting Evidence (This section is not scored)**

Please complete this section should you wish to set out any further information to support your application.

**Section M – About You (This section is not scored)**

**Disability**

**Do you consider yourself to have a disability as defined below?**

According to the Disability Discrimination Act 1995, a person with a disability is someone who has a physical or mental impairment which has a substantial and adverse, long term effect on his or her ability to carry out normal day-to-day activities.

**YES**

**NO**

Please give a basic summary of your disability and/or any specific assistance required here



**Section N – Equality Monitoring (This section is not scored)**

Please answer the questions below by ticking the boxes that you feel most describes you.

Some questions may feel personal, but the information we collect will be kept confidential and secure in accordance with the Data Protection Act.

**Please state your age category**

18-24		45-54	
25-34		55-64	
35-44		65-74	
75-84		85+	
Prefer not to say			

**a) Does your health or disability prevent you from doing things you want to, need to or have to?** (Your disability or health issue includes one which has lasted, or is expected to last, at least 12 months, and includes problems relating to old age.)

Yes, limited a lot		<b>If you have answered ‘yes’ please also answer part (b) as well</b>
Yes, limited a little		
No		
Prefer not to say		

**b) Which of the following options best describes your health issue or disability?**

**Please tick all the appropriate boxes**

Physical Disability (including mobility difficulties)	
Learning disabilities	
Mental ill Health	
Autism Spectrum Conditions	
Visual impairment	
Hearing impairment	
Deaf BSL user	
Speech impairment	
Learning difficulties e.g. Dyslexia	
Other substantial and long term condition	
Prefer not to say	
Other – please write in below	

**Which of the following options best describes your gender identity?**

Male	
Female	

Other	
Prefer not to say	

**Which of the following options best describes your race, ethnic or cultural origin?**

<b>White</b>	
English/Welsh/Scottish/Northern Irish/British	
Irish	
Gypsy or Irish Traveller	
Any other white background, write in below	
<b>Mixed/Multiple ethnic groups</b>	
White and Black Caribbean	
White and Black African	
White and Asian	
Any other Mixed/multiple ethnic background, write in below	
<b>Asian/Asian British</b>	
Indian	
Pakistani	
Bangladeshi	
Chinese	
Any other Asian background, write in below	
<b>Black/African/Caribbean/Black British</b>	
African	
Caribbean	
Any other Black/African/Caribbean background, write in below	
<b>Other ethnic group</b>	
Arab	
Any other ethnic group write in below	
Prefer not to say	
No religion	
Buddhist	
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	
Hindu	
Jewish	
Muslim	

**Which of the following options best describes your religion or belief?**

Sikh	
Prefer not to say	
Any other religion, write in below:	

**Which of the following options best describes your sexual orientation?**

Bi-sexual	
Gay man	
Gay woman or Lesbian	
Heterosexual or Straight	
Prefer not to say	
Other – write in below	

**Which of the following options best describes your relationship status?**

Civil Partnership	
Cohabiting	
Married	
Single	
Prefer not to say	