

Notice of Proposed Sunday Trading
(Sunday Trading Act 1994)

Name of shop:	
----------------------	--

Address of shop:	
Post code:	
Phone number:	

Proposed start date:	
-----------------------------	--

Proposed opening hours (please tick):			
<input type="checkbox"/>	10:00 am to 4:00 pm	<input type="checkbox"/>	10:30am to 4:30pm
<input type="checkbox"/>	11:00 am to 5:00 pm	<input type="checkbox"/>	11:30am to 5:30pm
<input type="checkbox"/>	12:00 noon to 6:00 pm	<input type="checkbox"/>	Other please state

Name of person supplying information:	
Position in company:	

Company Address (if different from above)	
--	--

Signed:		Date:	
----------------	--	--------------	--