

APPLICATION FOR A SCRAP METAL DEALERS LICENCE

SCRAP METAL DEALSERS ACT 2013

SECTION 1. (for all applic	ants)	
Please indicate the type of	of licence you are applying for (please tic	ck):
A site licence 🗌 A collec	tor's licence	
Are you applying as (pleas	se tick):	
An individual 🗌 A comp	any A partnership	
Please state your trading	name:	
Is this application for a gr	ant of a new licence or a renewal (pleas	e tick the relevant box):
Grant of a new licence] Renewal of an existing licence]
If a renewal please provid	de your existing licence number:	
SECTION 2. Permits, regis	strations and licences in force	
	any relevant environmental permit, exer e operator) in relation to the applicant:	mption or registration (such as a scrap metal
Туре:	Identifying number:	Date of issue:
Туре:	Identifying number:	Date of issue:
Continue on a separate sł	heet if necessary	
		crap metal licence issued by any authority to the
applicant within the last 3	3 years (please use a continuation sheet	if necessary):
		ugh Council, or you have held a licence issued by ast 12 months you must provide a tax check code
_		c-for-a-taxi-private-hire-or-scrap-metal-licence)
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Are you registered as a waste carrier? (please tick)
Yes 🗌 No 🗌
If 'yes' please provide your carrier's registration number:

SECTION 3. TO BE COMPLETED IF APPLYING FOR A SITE LICENCE N.B- A site licence authorises the licensee to carry on business at a site in the authority's area. You can apply to licence multiple sites using this form.	
Details of prospective licence holder	
Title (please tick):	I am 18 years old or over. Please tick
Mr Mrs Miss Ms Other	Yes No
(please state):	Date of Birth:
Surname:	Forenames:
Position/Role in the business:	
I attach a Basic Disclosure Certificate issued for the applic	cant1:
Yes 🔄 No 🔄	
If you do not provide a disclosure certificate your application may be delayed or rejected.	
Contact details (we will use your business address to correspond with you unless you indicate we should use your home address)	
Business Address:	Telephone numbers:
Head office name or house name or number:	Daytime:
First line of address:	Evening:
Town/City:	Mobile:
Postcode:	

¹ Further information about Basic Disclosure Certificates is set out in the explanatory notes accompanying this form.

Home address:	Email address (if you would prefer us to correspond with
House name or number:	you by email):
First line of address:	
Town/City:	
Postcode:	Please note that you must still provide us with a postal address
Site details . Please list the details for each site where yo within the Borough of Watford. If you operate more than on a continuation sheet. [N.B- If the applicant operates m should be made for more than one site manager]	n two sites in the area please provide details for each site
Full address of each site you intend to carry out business as a scrap metal dealer:	Site manager(s) details (if different from the applicant)
Site 1 Name or number:	Name:
First line of address:	House name or number:
Town/City:	First line of address:
Postcode:	Town/City:
Telephone number:	Postcode:
Email address:	Date of Birth:
Website address:	Basic Disclosure certificate attached: Yes No 2
Site 2 Name or number:	Name:
First line of address:	House name or number:
Town/City:	First line of address:
Postcode:	Town/City:
Telephone number:	Postcode:
Email address:	Date of Birth:
Website address:	Basic Disclosure certificate attached: Yes No

² If you do not provide a disclosure certificate issued for named persons issued no more than three months before the date of this application your application may be delayed or rejected.

Partnerships (If you are applying as a partnership, please provide the following details in respect of each partner – where there are more than two partners then please use a continuation sheet)	
Full name:	Full name:
Date of birth:	Date of birth:
Residential address:	Residential address:
Basic Disclosure certificate attached: Yes No 3	Basic Disclosure certificate attached: Yes No
Companies (If you are applying as a company please prov	vide the details set out below about the company)
Company name:	
Registration number:	
Address of the registered office:	
Please provide the following details for each director(s), are different from the applicant and site manager(s) – where the second seco	shadow director(s) and company secretary where these nere necessary please use a continuation sheet.
Role:	Role:
Name:	Name:
Date of Birth:	Date of Birth:
House name or number:	House name or number:
First line of address:	First line of address:
Town/City:	Town/City:
Postcode:	Postcode:
Basic Disclosure certificate attached: Yes No 4	Basic Disclosure certificate attached: Yes No

If you do not provide a disclosure certificate issued for named persons issued no more than three months before the date of this application your application may be delayed or rejected. If you do not provide a disclosure certificate issued for named persons issued no more than three months before the date of this application your application may be delayed or rejected.

Please provide details of any site in the area of any other local authority at which the applicant carriers on business as a scrap metal dealer or proposes to do so:		
Address:		
Postcode:		
Please name the local authority which has licensed this site, or to whom applications have been made if before commencement of the Scrap Metal Dealers Act 2013:		
Please continue on a separate sheet of paper if necessar	у.	
Only applicable to sites established after 1 November 19	90	
Do you have planning permission (please tick)		
Yes 🗌 No 🗌		
SECTION 4. TO BE COMPLETED IF APPLYING FOR A COLLECTOR'S LICENCE N.B- A collector's licence authorises the licensee to carry out business as a mobile collector in the authority's area only.		
Details of prospective licence holder		
Title (please tick):	I am 18 years old or over. Please tick	
Mr Mrs Miss Ms Other	Yes No	
(If other, please state):	Date of Birth:	
Surname:	Forenames:	
I attach a Basic Disclosure Certificate issued for the appli	cant 5 :	
Yes No		
If you do not provide a disclosure certificate your application may be delayed or rejected.		
Contact details (we will use your business address to correspond with you unless you indicate we should use your home address)		

⁵ Further information about Basic Disclosure Certificates is set out in the explanatory notes accompanying this form.

Business Address:	Telephone numbers:
House name or number:	Daytime:
First line of address:	Evening:
	Mobile:
Town/City:	
Postcode:	
Home address:	Email address (if you would prefer us to correspond with you by email):
House name or number:	
First line of address:	
T 100	
Town/City:	
Postcode:	Please note that you must still provide us with a postal address
Where will scrap metal that has been purchased be store	d before further disposal?
House name or number:	
First line of address:	
Town/City:	
Postcode:	
Will not be stored 🗌	

SECTION 5. MOTOR SALVAGE (For all applicants)

Will your business consist of acting as a motor salvage operator? This is defined as a business that:

- wholly or in part recovers salvageable parts from motor vehicles for re-use or re-sale, and then sells the rest of the vehicle for scrap;
- wholly or mainly involves buying written-off vehicles and then repairing and selling them off;
- wholly or mainly buys or sells motor vehicles for the purpose of salvaging parts from them or repairing them and selling them off.

(please tick)

Yes 🗌	No 🗌
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SECTION 6. BANK ACCOUNTS THAT WILL BE USED FOR PAYMENTS TO SUPPLIERS (For all applicants)

Please provide details of the bank account(s) that will be used to make payment to suppliers, in accordance with s12 of the Scrap Metal Dealers Act 2013. If more than two bank accounts will be used, please use a continuation sheet.

Account name:	Account name:
Sort code:	Sort code:
Account number:	Account number:

SECTION 7. DOCUMENT VERIFICATION

Please describe how you will verify the identity of documents of customers when buying and selling metal in accordance with the <u>Scrap Metal Dealers Act 2013 (Prescribed Documents and Information for Verification of Name and Address) Regulations 2013</u>).

Please include details of any training given to staff and instructions to contractors to ensure they comply with this requirement:

SECTION 8. DATA PROTECTION

Please state your registration number with the Information Commissioner:

Please describe the arrangements in place to ensure that customers' personal data provided on their identity verification documents are kept securely:

SECTION 9. PAYMENT (For all applicants)

For information on the scrap metal licence fees, please visit our website at <u>www.watford.gov.uk/scrapmetal</u>.

Please note that we can only accept payment by bank transfer or credit/debit card. If you wish to pay by card over the telephone, please call the licensing team on (01923) 278476.

If you have already paid before submitting this form, please write your receipt number or payment reference here:

SECTION 10. CRIMINAL CONVICTIONS (For all applicants)
Have you, any listed partners, any listed directors, or any listed site manager(s) in this application ever been convicted of a relevant offence or been the subject of any relevant enforcement action (the term 'relevant offence' is defined by the Act and accompanying regulations)?
Yes 🗌 No 🗌
If 'yes' you must provide details for each conviction, the date of the conviction, the name and location of the convicting court, offence of which you were convicted and the sentence imposed:

SECTION 11. DECLARATION (For all applicants)

The information contained in this form is true and accurate to the best of my knowledge and belief. I understand that if I make a material statement knowing it to be false, or if I recklessly make a material statement which is false, I will be committing an offence under Schedule 1 Para 5 of the Scrap Metal Dealers Act 2013, for which I may be prosecuted, and if convicted, fined.

I understand that the local authority to whom I make my application may consult other agencies about my suitability to be licensed as a scrap metal dealer, as per section 3(7) of the Scrap Metal Dealers Act 2013, and that those other agencies may include other local authorities, the Environment Agency, the Natural Resources Body for Wales, and the police.

I understand that the purpose of the sharing of this data is to form a full assessment of my suitability to be licensed as a scrap metal dealer. I also understand that the sharing of information about me may extend to sensitive personal data, such as data about any previous criminal offences. Some details will also be displayed on a national register, as required by the Scrap Metal Dealers Act 2013. I hereby expressly consent to this processing of my data and display of relevant information on the public register.

If applying for a licence for the first time, or if applying for a licence more than 12 months after having held a licence of the same type, I confirm that I am aware of the content of HMRC guidance relating to our/my tax registration obligations, specifically:

PAYE information: <u>www.gov.uk/income-tax/how-you-pay-income-tax</u> registering for Self Assessment: <u>www.gov.uk/register-for-self-assessment</u> Corporation Tax information: <u>www.gov.uk/corporation-tax</u>

Signed:

Date:

DATA PROTECTION – Keeping your personal information safe

Any data that you provide will be stored and processed by Watford Borough Council or its appointed agents in accordance with the law.

Information collected may be shared with other Council departments and/or organisations the Council works with who assist us in the performance of our functions. It may also be shared with outside organisations such as the Police, DWP, and County Council, to prevent and detect crime. It may be shared with insurance companies and bodies responsible for auditing or administering public funds for the prevention and detection of fraud. Schedule 23 to Finance Act 2011 (Data Gathering Powers) and Schedule 36 to Finance Act 2008 (Information and Inspection Powers), grant HMRC powers to obtain relevant information from third parties. This includes licensing bodies being required to provide information about licence applicants.

Further information on the Council's obligations to safeguard your personal information and your rights on accessing data held about you can be found on the Council's website at:

https://www.watford.gov.uk/privacynotice and https://www.watford.gov.uk/ehlprivacynotice or by telephoning 01923 278000