# South Lakeland District Council

Public Protection Group Licensing Team,

South Lakeland House, Lowther Street,   
Kendal, Cumbria, LA9 4UD

Tel: 01539 733333 Fax: (01539) 740300

# **APPLICATION FOR A SCRAP METAL LICENCE**

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| **SECTION 1 (For ALL applicants)** |
| Please indicate the type of licence you are applying for (please tick)  A site licence A collectors licence |
| Are you applying as (please tick)  An individual A company A partnership |
| Please state your trading name: |
| Is this application for a grant of a new licence or a renewal (please tick the relevant box):  Grant of a new licence Renewal of an existing licence  If renewal’ please provide your existing licence number: |
| **SECTION 2 Permits, registrations and licences in force** |
| Please provide details of any relevant environmental permit, exemption or registration (such as a scrap metal dealer or motor salvage operator) in relation to the applicant:  Type: Identifying number: Date of issue:  Type: Identifying number: Date of issue:  Continue on a separate sheet if necessary |
| Please provide details, including licence number, of any other scrap metal licence issued by any authority to the applicant within the last 3 years (please continue on a separate sheet if necessary):  Have you ever had an application for a site licence or collectors licence refused/revoked by another local authority **Yes/No**  If yes then please provide details of the local authority that refused your application or revoked your licence and the reasons for that decision. |
| Are you registered as a waste carrier? (please tick)  Yes No  If ‘yes’ please provide your carrier’s registration number: …………………………………………………….. |

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| **SECTION 3 TO BE COMPLETED IF APPLYING FOR A SITE LICENCE**  **N.B A site licence authorizes 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): Mr Mrs Miss Ms Other  Date of Birth:  Full Name:  Position/role in the business:  I attach a Basic Disclosure Certificate issued for the applicant by Disclosure Scotland.  Yes No  If you do not provide a disclosure certificate your application may be delayed or rejected:  Have you resided outside the UK in the last 5 years?  Yes No |
| **Contact details** ( we will use yor business address to correspond with you unless you indicate we should use your home address) |
| **Business address**  Head office name or house name or number  First line of address  Town / City  Postcode  Daytime Telephone Number  Mobile Telephone Number  Email Address |
| **Home Address PLEASE NOTE YOU MUST STILL PROVIDE US WITH YOUR HOME ADDRESS EVEN IF YOU DO NOT WISH IT TO BE USED FOR CORRESPONDANCE**  House name or number  First line of address  Town / City  Postcode  Daytime Telephone Number  Mobile Telephone Number  Email address |

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| Site Details  Please list the details for each site where you propose to carry on the business as a scrap metal dealer in this local authority area. If you operate more than two sites in the area please provide details for each site on a continuation sheet (N.B. If the applicant operates multiple sites within a licensing authority area, provision should be made for more than one site manager.) | |
| 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  First line of address  Town / City  Post code  Telephone Number  Email address  Website address | Name  House name or number  First line of address  Town / City  Postcode  Date of Birth  **Basic Disclosure Certificate attached**  Yes No |
| Site 2  Name or Number  First line of address  Town / City  Post code  Telephone Number  Email address  Website address | Name  House name or number  First line of address  Town / City  Postcode  Date of Birth  **Basic Disclosure Certificate attached**  Yes No |
| **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  Date of Birth  Residential address  **Basic Disclosure Certificate attached**  **Yes No** | Full name  Date of Birth  Residential address  **Basic Disclosure Certificate attached**  **Yes No** |

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| **Companies** – If you are applying as a company please provide 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), shadow director(s) and company secretary where these are different from the applicant and site manager(s) – where necessary please use a continuation sheet. | |
| Role  Name  Date of Birth  House name or number  First line of address  Town / City  Postcode  **Basic Disclosure Certificate attached**  Yes No | Role  Name  Date of Birth  House name or number  First line of address  Town / City  Postcode  **Basic Disclosure Certificate attached**  Yes No |
| Please provide details of any site in the area of any other local authority at which the applicant carries 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. | |
| *Only applicable to sites established after 1 November 1990*  Do you have planning permission (please tick)  Yes No  What year did this site begin trading as a Scrap Metal Yard? | |

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| **SECTION 4 TO BE COMPLETED IF APPLYING FOR A COLLECTOR’S LICENCE N.B. – A collector’s licence authorizes the licensee to carry out business as a mobile collector in the authority’s area only** |
| **Details of prospective licence holder.** |
| Title (please tick): Mr Mrs Miss Ms Other  Date of Birth  Full Name  I attach Basic Disclosure Certificate issued for the applicant by Disclosure Scotland.  Yes No  If you do not provide a disclosure certificate your application may be delayed or rejected.  Have you or any other persons named in your application resided outside the UK in the last 5 years?  Yes No |
| **Contact details** ( we will use your business address to correspond with you unless you indicate we should use your home address) |
| **Business Address**  Head office name or house name or number  First line of address  Town / City  Postcode  Daytime Telephone Number  Mobile Telephone Number  Email Address |
| **Home Address PLEASE NOTE YOU MUST STILL PROVIDE US WITH YOUR HOME ADDRESS EVEN IF YOU DO NOT WISH IT TO BE USED FOR CORRESPONDANCE**  House name or number  First line of address  Town / City  Postcode  Daytime Telephone Number  Mobile Telephone Number  Email Address |

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| Where will scrap metal that has been purchased be stored before further disposal?  House name or number  First line of address  Town / City  Postcode  Will not be stored | |
| Vehicle Registration Number  (Please use a separate sheet if you wish to  register more than one vehicle) |  |
| Make |  |
| Model |  |
| Colour |  |
| Tax Class |  |
| Insurance Company |  |
| Insurance Policy Number |  |
| Environment Agency Waste Carriers Licence Number |  |
| Your vehicle registration documents (V5 log book and MOT), Insurance Certificate and Waste Carriers Licence will be required to be submitted along with your application.  A passport size photograph is required to be submitted by an applicant for a collector’s licence. **Please see notes attached at Section 4 regarding specific requirements for providing a photograph**. | |
| **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; and, * 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  Sort Code  Account Number | Account Name  Sort Code  Account Number |
| **SECTION 7 PAYMENT (For all applicants)** | |
| There is a fee payable to apply for a licence. Details of the fees payable can be found on our website at:-  http://www.southlakeland.gov.uk/licensing-and-permits/list-of-licence-fees-2015-16/  Alternatively please contact the Licensing Section to confirm details of the fee payable.  Please note that we can only accept payment by cheque, credit / debit card.  Applications will not be accepted unless the correct fee has been paid. | |
| **SECTION 8 CRIMINAL CONVICTIONS (For all applicants)** | |
| Have you, or any listed partners or director’s , 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? (Please see attached for a list of relevant offences).  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. Please use a continuation sheet if necessary. | |
| **SECTION 9 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 is 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 and the Police.  I understand that the purpose of the sharing of this data is to form 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.  Signed …………………………………………………………………. Date ……………………………………………………………….. | |

Please submit the following with your application:

Basic Disclosure Certificate (original copy) – please note that were applications are being made on behalf of a company, all directors, secretaries and site managers are required to submit a Basic Disclosure

Relevant Fee – please contact the Licensing Department for details of the required fee

Photographic ID for each person required such as driving licence or passport

Evidence of address, e.g bank statement, council tax form

Evidence of bank account details – see Section 6 of the application form

**Additional requirements for Collectors Licences:-**

For collectors licences we require you to supply a passport size photograph duly signed on the ack. Please see specific requirements regarding the supply of a photograph in the notes at Section 4 attached.

For collectors licences we require your vehicle registration documents (V5 log book and MOT), Insurance certificate and waste carriers licence.

Details of any collectors directly employed by you as part of your business.

**Application for a Scrap Metal Licence**

**Additional Information for a Collectors Licence Application**

**Employed Collectors**

Whilst there is no requirement for other collectors directly employed by a collectors licence holder to obtain their own licence, for the purpose of the council’s records it is necessary to have the details of such persons. Therefore, if you do directly employ other collectors as part of your business then you are required to provide **a list of the FULL names and addresses of all such persons** along with your completed application form.

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| Name | Address (including Postcode) | Date of Birth |
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