APPLICATION FOR A SCRAP METAL DEALERS SITE LICENCE

North Lincolnshire Council

www.northlincs.gov.uk

North Lincolnshire Council is under a duty to protect the public funds it administers and to prevent and detect crime, and to this end may use the information you have provided on this form within this authority for the prevention and detection of fraud or crime. It may also share this information with other bodies administering public funds solely for these purposes.

SECTION 1 – Licence Type											
Are you applying as:											
	An I	ndividual		A Compa	ny		A Partn	ership			
Please sta	Please state your trading name:										
Is this appl	Is this application:										
	Grai	nt			Rer	newal					
If renewal,	please p	rovide your existing lice	nce number:								
SECTION	l 2 – Per	mits, Registrations	and Licences	s in force							
		ails of any relevant env ator) in relation to the ap						crap metal dealer o	ra		
Туре			Ref number			Date of Is	ssue				
Туре			Ref number			Date of Is	ssue				
Do you have	ve planni	ng permission? (Only ap	oplicable to site	s establish	ed after 1 Nov	ember 19	90)				
	Yes				No						
	Please provide any details, including licence number, of any other Scrap Metal Registration issued by any authority to the applicant within the last 3 years										
Issuing Au	thority		Ref number			Date of Is	ssue				
Issuing Authority		Ref number				Date of Issue					
Are you registered as a Waste Carrier?											
Yes				No							
If yes, please provide your carrier's registration number:											

SECTION 3 – Additional Information								
Applicant Details								
Title	Surname							
Forename(s)			Date of Birth					
Address								
Postcode		Tel Number						
Mobile Number		Email Address						
Position/Role in Bu	usiness							
Correspondence	Address							
Address								
Postcode		Tel Number						
Mobile Number		Email Address						
Partnership - Ple	ase provide details for the seco	nd partner						
Title	Surname							
Forename(s)			Date of Birth					
Address								
Postcode		Tel Number						
Mobile Number		Email Address						
Position/Role in Business								

Company Details									
Company Name									
Company Number									
Registered Address									
Please provide the	details for	r each di	rector, shade	ow direc	ctor and co	mpa	ny secretary		
Title			Surname						
Forename(s)						Dat	te of Birth		
Address									
Postcode				Tel Nu	mber				
Mobile Number				Email Address					
Position/Role in Bus	siness								
Title			Surname						
Forename(s)						Dat	te of Birth		
Address									
Postcode				Tel Nu	mber				
Mobile Number				Email /	Address				
Position/Role in Business									

Site Details		
		ess as a scrap metal dealer in this local authority s for each site on a continuation sheet
Site 1		
Name or Number		
Address		
Tel Number	Email Address	
Site Manager		
Title	Surname	
Forename(s)		Date of Birth
Address		
Postcode	Tel Number	
Mobile Number	Email Address	
Site 2		
Name or Number		
Address		
Tel Number	Email Add	drass
Site Manager	Lillali Add	11033
Title	Surname	
ride	Suriame	
Forename(s)		Date of Birth
A deluce o		
Address		
Postcode	Tel Number	
Mobile Number	Email Address	

	ails of any site in the area or proposes to do so:	of any other local autho	ority at wh	nich the applicant carries on business	as a
Address					
Postcode		Tel Number			
	local authority which has the Scrap Metal Dealers A		to whom	applications have been made if b	efore
Section 4 Meter	or Salvago				
Section 4 – Moto	consist of acting as a Moto	r Salvage Operator? This	is defined	d as a husingse that:	
vviii your business	consist of acting as a Moto	i Salvage Operator: Triis	is defined	a as a business that.	
 Wholly or i vehicle for 		e parts from motor vehicle	es for re-ι	use or re-sale, and then sells the rest of	of the
	nainly involves buying writt	en-off vehicles and then r	epairing a	and selling them off; and,	
 Wholly or selling there 		vehicles for the purpose	of salvag	ging parts from them or repairing them	n and
Yes			l l	No	
Section 5 - Ban	C Details				
Please provide det Scrap Metal Deale		that will be used to make	payment	t to suppliers, in accordance with s12 o	of the
Bank Name					
Account Name					
Sort Code		Account Number			
Section 6 - Crim	inal Convictions				
	ners, directors or site man- any relevant enforcement		olication e	ever been convicted of a relevant offen	ce or
Yes			N	No	
If 'yes' you must pr	ovide details below				
Date of c	onviction	Offence	\$	Sentence (including suspended sentences)	

Section 7 – HMRC Tax Registration guidance and Tax Check

Applicants for a scrap metal site licence must evidence their understanding of their tax responsibilities, or provide a tax check code from HMRC.

New Applications

If you are a new applicant, and have not held a scrap metal site licence in the last year, then you are required to confirm your understanding of your tax obligations.

your understanding or yo	our tax obligations.				
PAYE informationregistering for S	ing links to HMRC guidance about: on: www.gov.uk/register-for-se-information: www.gov.uk/corporation-tax				
By signing, you hereby of	confirm you are aware of the content of HM	RC gui	dance relati	ing to your tax registration	obligations.
Applicant Signatur	e:	i	Date:		
North Lincolnshire or in a	or as an applicant who either holds another another local authority), or has held such a d for tax and must complete the tax check.				
	v.gov.uk/guidance/complete-a-tax-check-fo 9-digit code given into the box below.	<u>r-a-taxi</u>	-private-hire	e-or-scrap-metal-licence to	complete a
Tax Check Cod	e:				
Section 8 - Checklis	t and Declaration				
I have made or enclosed	d payment of the fee				
I have enclosed the original	inal certificate of basic disclosure for each r	elevan	t person		
I have enclosed one bar	nk statement dated within three months rela	ting to	each accou	int previously mentioned	
I have completed every	section of this application form				
I understand that if I do	not comply with the above requirements my	applic	ation will be	e rejected	
make a material statem	ed in this form is true and accurate to the nent knowing it to be false, or if I reckles nder Schedule 1 Para 5 of the Scrap Metal	sly ma	ke a mater	ial statement which is fal	se, I will be
metal dealer, as per sec	ormation provided will be shared with other ction 3(7) of the Scrap Metal Dealers Act 2 v, the police, and any other organisation dea	2013. T	hose agend	cies will include other loca	
scrap metal dealer. I als as data about any previo	urpose of the sharing of this data is to form o understand that the sharing of information ous criminal offences. Some details will als t 2013. I hereby expressly consent to this p	n abou o be di	it me may e isplayed on	extend to sensitive personal a national register, as req	al data, sucl quired by the
Applicant Signature			Dated		

NOTES

Section 1 – Please select what you are applying as. We require full names, addresses and dates of birth for all that are involved in the business, to be completed in Section 3.

Section 2 – In order to carry on your business, you may need to hold other environmental permits or licences that we should know about. For instance, if you carry waste as part of your business it is a legal requirement to register as a waster carrier. This includes transporting waste while travelling from job to job, to a storage place for disposal later, or to a waste disposal company or waste site. For more information on this or to register, call: 03708 506506 or visit: www.environment-agency.gov.uk/wastecarriers.

This section also asks for details of any other scrap metal licences you hold. Please make sure you include the licence number so that we can check this against the national register.

Section 3 – This should be filled out in the name of the person who will hold the licence. As well as details about you and your business, we will also need details of any directors, shadow directors, company secretary or partners involved in the business including their home address and date of birth. We also need to know the address of the site or sites you want the licence for, as well as the details of each site manager responsible for that site.

You and each person listed is required to submit a Basic Disclosure Certificate from the Disclosure and Barring Service (DBS). You can apply for this at https://www.gov.uk/request-copy-criminal-record. A Basic Disclosure Certificate is only valid for a limited time, please ensure that your certificate is no older than three months old when you submit this application to us.

Section 4 – This section asks if you will be salvaging motor vehicles as part of your work. The Scrap Metal Dealers Act 2013 brings together the Scrap Metal Dealers Act 1964 and Part 1 of the Vehicles (Crime) Act 2001, which means you now only need a scrap metal dealers licence.

Section 5 – We require the details for the bank account(s) that you will be using for the scrap metal you receive or sell. This is to check that you are not selling the metal for cash, which is illegal. These details will be kept securely by the council.

Section 6 – You are required to set out the details of any relevant convictions or enforcement action that has been undertaken against you. It is an offence under the Scrap Metal Dealers Act 2013 to make or recklessly make a false statement. The information listed here will be checked against the Basic Disclosure Certificate that is submitted with the application, along with information retained by any organisation deemed necessary under the Act.

Section 7 – The person completing the form on behalf of a company or partnership will complete the tax check. 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.

Section 8 – The person completing the form must sign and date this section; this is also to confirm that you agree with the declaration and that you have completed everything required on the checklist.