

Scrap Metal Dealers Act 2013

Application for a Scrap Metal Dealer's Licence

Please write in **BLOCK CAPITALS**, and ensure that your answers are inside the boxes and written in **black ink**. All questions must be answered. Incomplete applications will not be processed. You may wish to keep a copy of the completed form for your records.

Section I: Licence details						
What type of licence do you wish to apply for? (tick one)	☐ Site Licence ☐ Collector's Licence					
What type of application do you wish to make? (tick one)	☐ Grant of a new Licence ☐ Renewal of an existing Licence ☐ Variation of an existing Licence (change of licence type) ☐ Variation of an existing Licence (change of licensed sites) ☐ Variation of an existing Licence (change of site managers)					
Current licence number: (leave blank if you are making a new application)	SK/	Expiry date of current licence:				
If you are applying to vary an existing licence from which date do you wish the proposed amendments to take effect?						
Section 2: Business details						
Please give the trading name(s) by which your business is/will be known (if any)						
Please indicate the business activities that you intend to carry on under this licence:	Buying and selling scrap metal Recovering salvageable parts from motor vehicles for re-use or sale Buying written-off vehicles for repair and resale Buying or selling vehicles for salvage or repair purposes					
	☐ Other					

Section 3: Site details	3: Site details Do not complete if you are applying for a Collector's licence						
How many sites do you intend	to operate under this licence if yo	our application is granted	?				
I have completed Annex A with details of all the sites where it is proposed to carry on business as a scrap metal dealer under this licence, and the managers of those sites (please tick)							
If more than four sites are to be o	perated please give details of furthe	er sites on an additional she	et.				
If you are applying to vary a licence please include details of all of your sites even if the proposed changes do not affect those sites and highlight any changes to site details or site manager details as applicable.							
Do you also intend to operate a	Do you also intend to operate any mobile collection vehicles from these sites?						
If so, please describe the arrangements for how these vehicles will operate:							
Section 4: Collector's det	tails Do not complet	e if you are applying	for a Site li	cence			
How many vehicles do you inte	nd to operate under this licence	if your application is gran	ted?				
Where will the vehicle(s) be							
kept when not in use?							
	, permits and registrations						
Do you currently hold a scrap metal site licence issued by South Kesteven District Council or any other council, or have you held such a licence within the previous 3 years?							
Do you currently hold a scrap metal collector's licence issued by South Kesteven District Council or any other council, or have you held such a licence within the previous 3 years?							
Do you currently hold a relevant environmental permit or registration?							
Are you registered as a waste carrier?							
If you have answered 'yes' to any of the above please give details of the licence, permit or registration below: (continue on a blank sheet where necessary)							
Licence/permit type	Issued by	Reference number	Start date	End date			
	1						

Section 6: Purchase arrangements
Please describe your arrangements for keeping records of scrap metal transactions, in accordance with the relevant statutory requirements:
Please describe your arrangements for verifying the identity of a person wishing to supply scrap metal to you, in accordance with the relevant statutory requirements:
with the relevant statutory requirements.
How do you intend to ensure the security of the scrap metal you have purchased or collected in the course of your business, including unlawful sale or purchase or theft?

Section 7: Applic	ant's detai	ls		
		☐ An individual	Please give details in Part A	
This application is made by: (tie		☐ A partnership	Please give	details in Parts A & B
one)		☐ A limited company	Please give	details in Part C
Part A: Individua	l applicant	/First partner	☐ Mr ☐ Mrs ☐ M	1s 🗆 Other
Full name:				
Home address:				
Date of birth:	/			
Daytime phone number:			Mobile phone number:	
Email address:				
Part B: Second pa	artner		☐ Mr ☐ Mrs ☐ M	1s 🗆 Other
Full name:				
Home address:				
Date of birth:	/			
Daytime phone number:			Mobile phone number:	
			number:	
Email address:				
If there a	are more thar	n two partners please give the	details of further partn	ners on a separate sheet.
Part C: Limited C	Company a	pplicant Please al	so complete Anne	x B with Director's details
Registered name:				
Registered office address:				
Company registration number:	1			☐ UK: Companies House ☐ Other
Daytime phone numb	er:			
Email address:				

Section 8: Suitability of applicant(s)				
In the following questions, 'relevant person' includes: • The individual applying for the licence • Any of the partners of a partnership applying for a • Any of the directors, company secretary, or shadow • Any site manager identified in this application				
Has any relevant person previously been convicted of a previously been cautioned in respect of a relevant offencaution is not considered to be 'spent'? Convictions and cautions which are considered 'spent' under Offenders Act 1974 need not be disclosed. Driving licence en	the provisions of the Rehabilitation of	□Yes □ No		
Has any relevant person been charged with an offence a those proceedings?	nd is currently awaiting the outcome of	☐ Yes ☐ No		
Has any relevant person previously had an application for metal licence revoked, by any council	or a scrap metal licence refused, or a scrap	☐ Yes ☐ No		
Has any relevant person previously been subject to any council or applicable government agency?	other relevant enforcement action, by any	☐ Yes ☐ No		
If any of the above questions have been answered 'yes', please provide further details in respect of those matters in the space below:				
Please note that a Basic Disclosure certificate must be supplied, at the time of application, in respect of every applicant (or partner, or director of a limited company applicant) and site manager named in this application. Certificates are available from Disclosure Scotland by telephoning 0870 609 6006 or www.disclosurescotland.co.uk and must have been obtained in the relevant individual's name and issued within the last 3 months.				
Section 9: Bank account details (for paymer	nts to scrap metal suppliers)			
As part of the application process, the Council is required from which payments for scrap metal will be made. It is or electronic funds transfer.	•	- ,		
Please give details of this account below:				
Name of bank/building society:				
Name in which account is held:				
Sort code and account number:				

Section 10: Application fee(s)

Please see our website for the relevant Fees and Charges which relate to your application Payment can be made via our Customer Service Team on 01476 406080 by selecting the payment option or online on the following link: South Kesteven District Council - Online Payments.

Section	Section II: HMRC Conditionality Check					
Applicants	Applicants for a scrap metal site or collector's licence MUST comply with the HMRC tax registration checks.					
Please tick	ONE of the following:					
th re <u>ht</u>	I am a NEW applicant, that is an individual, company or any type of partnership that is applying for a licence for the first time or if you have already held a licence that has not been valid for a year or more. I confirm that I have read the HMRC guidance on tax registration responsibilities. Guidance can be found be found at: https://www.gov.uk/guidance/confirm-your-tax-responsibilities-when-applying-for-a-taxi-private-hire-or-scrap-metal-licence					
<u>a-</u> 1	I am a RENEWAL applicant and have completed the HMRC tax check: https://www.gov.uk/guidance/complete-a-tax-check-for-a-taxi-private-hire-or-scrap-metal-licence . I understand that SKDC cannot process my application without a valid 9-character tax check code.					
Н	MRC TAX CHECK CODE (RENEWALS ONLY):					
Section	12: Declaration and signatures Every applica	nt must sign the form				
I mak	• 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 the Act, for which I may be prosecuted, and if convicted, fined.					
and th	I understand that the Council may consult other agencies about my suitability to be licensed as a scrap metal dealer, and that those other agencies may include other local authorities, the Environment Agency, and other local and national police forces.					
suitab exten on a r	• I understand that data within this application may be shared with other agencies, for the purpose of assessing 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 the processing of my data and display of relevant information on the public register.					
• If you're an individual, company or any type of partnership you must confirm you are aware of your tax responsibilities if you're applying for a licence for the first time or if you have already held a licence that has not been valid for a year or more. I confirm that I have complete the tax check on the government website https://www.gov.uk/guidance/confirm-your-tax-responsibilities-when-applying-for-a-taxi-private-hire-or-scrap-metal-licence						
Signed	Print name: Da	ate:				
Signed	Print name: Da	ate:				
	e more than two partners, a copy of this page should be taken to allow all partners to signed application is made by a limited company, the form should be signed by an officer of the					

Completed application forms should be submitted, along with *basic disclosure certificates for the applicant, partners, company directors and site managers, and payment of the appropriate fee(s), to:

Environmental Protection South Kesteven District Council, Council Offices, The Picture House, St Catherine's Road, Grantham, NG31 6TT

(*basic disclosure certificates are available from Disclosure Scotland by telephoning 0870 609 6006 or www.disclosurescotland.co.uk)

Data Protection - PLEASE READ THIS NOTICE CAREFULLY

We will use the information you provide in this form and in any supporting documents to process and determine your application for a licence. The information will be held on file and on an internal database, and such public documents as we may be required to maintain.

The information supplied may be passed to other bodies, including law enforcement agencies and government departments, as allowed by law. We may check information you have provided, or information that another person has provided, with other information we hold. We may also obtain information about you from, or provide information to, organisations such as government departments, law enforcement agencies, other local authorities and private sector organisations such as banks, insurance companies or legal firms, to verify the accuracy of information, prevent or detect crime, or protect public funds.

We will not give your information to anyone else, or use information about you for other purposes, unless the law requires us to.

South Kesteven District Council is the data controller for the purposes of the Data Protection Act. If you would like to know more about what information we hold about you, or the way we use it, please contact us.

Office use only:						
Date received:		Fee received:	□ Chasus □ Cond			
Receipt number:			☐ Cheque ☐ Card			
App complete:		Licence approved:				
Licence valid from:		Licence expires:				

Annex A – details of scrap metal sites							
	Site details			Site manager details			
Site	Postal Address	Opening Hours	Phone number	Email address	Full name	Home address	Date of birth
ı							
2							
3							
4							

Annex B - Details of limited company directors					
Please complete the fo	llowing details for each director of t	he company. Use addition	nal sheets where necessary.		
Director I		☐ Mr ☐ Mrs ☐ Ms ☐	Other		
Full name:					
Home address:					
Date of birth		Daytime phone number:			
Director 2		☐ Mr ☐ Mrs ☐ Ms ☐	Other		
Full name:					
Home address:					
Date of birth:		Daytime phone number:			
Director 3		☐ Mr ☐ Mrs ☐ Ms ☐	Other		
Full name:					
Home address:					
Date of birth:		Daytime phone number:			
Director 4		☐ Mr ☐ Mrs ☐ Ms ☐	Other		
Full name:		•			
Home address:					
Date of birth:		Daytime phone number:			

Please note that a Basic Disclosure, issued within the last 3 months, must be submitted for each director.