

## SCRAP METAL ACT 2013

### Application for a Scrap Metal Dealer's Licence

Please write legibly 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 1. (for all applicants)

Please indicate the type of licence you are applying for (*tick one*):

A site licence  A collector's 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 'yes' 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 a 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 use a continuation sheet if necessary*):

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' ONLY

**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)*:

Mr  Mrs  Miss  Ms

Other  *(please state)*:

I am 18 years old or over *(please tick)*

Yes  No

Date of Birth:

Surname:

Forenames:

Please give the trading name(s) by which the business is/will be known:

Position/Role in the business:

I attach a 'Basic Disclosure Certificate' issued for the applicant by Disclosure Scotland<sup>1</sup>:

Yes  No  If no, please give details as to why:

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)*

I wish all correspondence to be sent to my:  Business  Home *(please tick)*

Business Address:

Telephone numbers:

Head office name or house name or number:

Daytime:

First line of address:

Evening:

Town/City:

Mobile:

Postcode:

<sup>1</sup> Further information about Basic Disclosure Certificates and Disclosure Scotland are set out in the explanatory notes accompanying this form.

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

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

<p><b>Site 2</b></p> <p>Name or number:</p> <p>First line of address:</p> <p>Town/City:</p> <p>Postcode:</p> <p>Telephone number:</p> <p>Email address:</p> <p>Website address:</p>	<p>Name:</p> <p>House name or number:</p> <p>First line of address:</p> <p>Town/City:</p> <p>Postcode:</p> <p>Date of Birth:</p> <p><b>Basic Disclosure certificate attached:</b>  Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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**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)

<p>Full name:</p> <p>Date of birth:</p> <p>Residential address:</p> <p><b>Basic Disclosure certificate attached:</b>  Yes <input type="checkbox"/> No <input type="checkbox"/> <sup>3</sup></p>	<p>Full name:</p> <p>Date of birth:</p> <p>Residential address:</p> <p><b>Basic Disclosure certificate attached:</b>  Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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**Companies** (If you are applying as a company, please provide the details set out below about the company)

<p>Company name:</p> <p>Registration number:</p> <p>Address of the registered office:</p>
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Please provide details for each director(s), shadow director(s) and company secretary where these are different from the applicant and site manager(s) on **Annex A**.

<sup>3</sup> If you do not provide a disclosure certificate issued for named persons by Disclosure Scotland 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 carries on business as a scrap metal dealer or proposes to do so:

Name of Business:

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 necessary.

*Only applicable to sites established after 1 November 1990*

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): Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> (please state):	I am 18 years old or over. Please tick Yes <input type="checkbox"/> No <input type="checkbox"/> Date of Birth:
Surname:	Forenames:

I attach a Basic Disclosure Certificate issued for the applicant by Disclosure Scotland<sup>4</sup>:

Yes  No  If no, please give details as to why:

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)

I wish any correspondence to be sent to my: Business  Home  address (please tick one)

<sup>4</sup> Further information about Basic Disclosure Certificates and Disclosure Scotland are set out in the explanatory notes accompanying this form.

Business Address:  House name or number:  First line of address:  Town/City:  Postcode:	Telephone numbers:  Daytime:  Evening:  Mobile:
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Home address:  House name or number:  First line of address:  Town/City:  Postcode:	Email address (if you would prefer us to correspond with you by email):    Please note that you must still provide us with a postal 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:

**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.

Yes  No  (please tick)

**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. As part of the application process, Hertsmere Borough Council is required to verify that the business has a bank or building society account from which payments for scrap metal will be made. It is an offence to make payments for scrap metal other than by cheque or electronic funds transfer.

Account name:

Account name:

Sort code:

Sort code:

Account number:

Account number:

**SECTION 7: PURCHASE ARRANGEMENTS (For all applicants)**

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:

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 8. PAYMENT (For all applicants)**

How do you wish to make payment for your scrap metal dealer's licence? *(please tick)*

- I enclose a cheque for £ ..... payable to 'Hertsmere Borough Council'
- I wish to pay the application fee(s) by credit or debit card – please phone 020 8207 7435 to arrange payment.  
*Please note: a merchant fee applies for credit cards (currently 1.45%)*

Please state the receipt number given upon payment of credit or debit card: WS ..../..../..../..../....

**SECTION 9. CRIMINAL CONVICTIONS (For all applicants)**

*In the following questions, 'relevant person' includes:*

- *The individual applying for the licence*
- *Any of the partners of a partnership applying for a licence*
- *Any of the directors, company secretary, or shadow directors of a company applying for a licence*
- *Any site manager identified in this application*

Has any relevant person previously been 'convicted' of a relevant offence, or has any relevant person previously been 'cautioned' in respect of a relevant offence, in either case where the 'conviction' or 'caution' is not considered to be 'spent'?

Yes  No

*Convictions and cautions which are considered 'spent' under the provisions of the Rehabilitation of Offenders Act 1974 need not be disclosed. Driving licence endorsements are also not relevant*

Has any relevant person been charged with an offence and is currently awaiting the outcome of those proceedings?

Yes  No



Has any relevant person previously had an application for a scrap metal licence refused, or a scrap metal licence revoked, by any council?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has any relevant person previously been subject to any other relevant enforcement action, by any council or applicable government agency?	Yes <input type="checkbox"/> No <input type="checkbox"/>

If any of the above questions have been answered 'yes', please provide further details in respect of those matters in the space below: *(Please use a further sheet of paper if necessary)*

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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 must have been obtained in the relevant individual's name and issued within the last 3 months.

**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 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, for Wales, and national police forces.

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.

Signed		Print name:		Date:	
Signed		Print name:		Date:	

If there are more than two partners, a copy of this page should be taken to allow all partners to sign. Where the application is made by a limited company, the form should be signed by an officer of the company.

Completed application forms should be submitted, along with the following:

- Basic disclosure certificates for the applicant, partners, company directors and site managers;
- Payment of the appropriate fee;
- Two passport sized photographs which should be full faced and uncovered, unless the person wears a head covering due to religious beliefs. One photograph must be endorsed with a statement verifying the likeness of the photograph to the applicant by a solicitor, notary, a person of standing in the community or any individual with a professional qualification;
- Verification of photograph declaration;
- Passport or DVLA licence (photo card type);
- Debit/credit card, bank building society statement or utility bill/council tax letter or demand (not more than 3 months old and a mobile telephone bill will not be accepted)

Application, fee and all supporting documentation should be sent to:

**Hertsmere Borough Council, Environmental Health,  
Civic Offices, Elstree Way, Borehamwood, Herts., WD6 1WA**

**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. Hertsmere Borough 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.

### Annex A - Details of limited company directors

Please complete the following details for each director of the company. Use additional sheets where necessary.

Director 1		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other .....	
Full name:			
Home address:			
Date of birth	...../...../.....	Daytime phone number:	

Director 2		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other .....	
Full name:			
Home address:			
Date of birth:	...../...../.....	Daytime phone number:	

Director 3		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other .....	
Full name:			
Home address:			
Date of birth:	...../...../.....	Daytime phone number:	

Director 4		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> 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.