## PUBLIC HEALTH ACT

Public Health (Waste) (Licensing Forms) Rules

## Form 1 - Application For A Licence To Carry Out An Activity Prescribed By Section 192D of the Public Health Act.

(In answering any questions, you may continue on a separate sheet which you must clearly mark and attach firmly to this form).

Name......
Business Address.....

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3. Registered Address (*if different*).....

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4. Please provide details of your telephone number, fax number or email

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5. Please provide details of a licensed financial institution prepared to supply us with a credit reference of your business

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6. What Prescribed Activity do you propose to pursue? (tick as appropriate)

- disposal of waste
- storage of waste
- abandonment, dumping or otherwise depositing waste on any land (in so far as such activity does not constitute a disposal)
- collection of waste oil
- disposal of waste oil
- regeneration of waste oil
- use of waste oil as fuel
- storage of waste oil
- disposal of the residues of regeneration of waste oil
- collection of hazardous waste
- transport of hazardous waste

7. How do you intend to carry out your prescribed activity?

8. What categories of waste products do you intend to deal with?

9. What environmental health protection measures do you propose to take? Please give full details of the technology, machinery, hardware or software you intend to use.

10. What quantities of waste do you estimate you shall be dealing with?

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11. What security precautions do you propose to take in your premises and regarding your equipment?

**12.** Please provide full details of the site on which you intend to dispose of the relevant waste products?

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**13.** Please provide full details of the method(s) which you propose to use in the treatment of the relevant waste.

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14. Have you registered with the Government as a waste collector or as an agent for a waste collector?

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15. How do you propose to store waste products?

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16. Do you propose to store toxic substances separately from other waste products? Please give details.

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17. Do you intend to make any atmospheric emissions? If so, please give full details including the estimated level of any such emissions.

 18. Do you intend to dispose of polychlorinated biphenyls or polychlorinated terphenyls or any mixture of the two (PCB's)? If so, please provide full details of the technical equipment you intend to use and which you consider will make your installation an appropriate one of the pursuance of such activities, stating the reasons for your belief in that equipment's appropriateness.

**19.** What arrangements do you intend to make to maintain full records of all aspects of the running and management of your installation?

20. Have you complied with the licensing procedures as set out in section 192Q of the Public Health Act?

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I certify that the information contained in this Application is true to the best of my knowledge and belief.

(Signature of applicant)

(Date of application)

<u>Please post this application to</u>: Environmental Agency Ltd 37, Town Range, Gibraltar