



Scrap Metal Dealers Act 2013

Application for a Scrap Metal Dealers Licence

All applicants should read the explanatory notes attached to this form before filling in their application.

SECTION 1. (for all applicants)

Please indicate the type of licence you are applying for (please tick one box only):

A site licence A collector's licence

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

To operate as a motor salvage operator you will need to apply for a site 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. TO BE COMPLETED IF APPLYING FOR A SITE LICENCE**N.B- A St. Helens site licence only authorises the licensee to carry on business at site(s) in St. Helens. You can use this form to apply to licence multiple sites within St. Helens.****Details of prospective licence holder(s)**

Title (please tick):

Mr Mrs Miss Ms Other (If 'other'
please state):

I am 18 years old or over. Please tick

Yes No

Date of birth:

Place of birth:

Surname:

Forenames:

Please also state your maiden name or any other surnames you have previously been known by:

Position/Role in the business:

I attach a Basic Disclosure Certificate issued for the applicant by Disclosure Scotland: ¹Yes No

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)

Business Address:

Head office name or house name or number:

First line of address:

Town/City:

Postcode:

Telephone numbers:

Daytime:

Evening:

Mobile:

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

<p>Home address:</p> <p>House name or number:</p> <p>First line of address:</p> <p>Town/City:</p> <p>Postcode:</p> <p><input type="checkbox"/> Please use my home address for correspondence</p>	<p>Date of birth:</p> <p>Place of birth:</p> <p>Email address (if you would prefer us to correspond with you by email):</p> <p>Please note that you must still provide us with a postal address</p>
<p>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>	
<p>Full name:²</p> <p>Date of birth:</p> <p>Place of birth:</p> <p>Residential address:</p> <p>Basic Disclosure certificate attached: ³</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Full name:</p> <p>Date of birth:</p> <p>Place of birth:</p> <p>Residential address:</p> <p>Basic Disclosure certificate attached:</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Companies (If you are applying as a company please provide the details set out below about the company)</p>	
<p>Company name:</p> <p>Registration number:</p> <p>Address of the registered office:</p>	
<p>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.</p>	

² Please also state your maiden name or any other surnames you have previously been known by.

³ Further information about Basic Disclosure Certificates and Disclosure Scotland are set out in the explanatory notes accompanying this form.

Role: Name: Date of birth: Place of birth: House name or number: First line of address: Town/City: Postcode: Basic Disclosure certificate attached: Yes <input type="checkbox"/> No <input type="checkbox"/>	Role: Name: Date of birth: Place of birth: House name or number: First line of address: Town/City: Postcode: Basic Disclosure certificate attached: Yes <input type="checkbox"/> No <input type="checkbox"/>
Site details. Please list the details for each site where you propose to carry on business as a scrap metal dealer in St. Helens. 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 St. Helens, 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):
<i>Site 1</i> Name or number: First line of address: Town/City: Postcode: Telephone number: Email address: Website address:	Name: ⁴ House name or number: First line of address: Town/City: Postcode: Date of birth: Place of birth: Basic Disclosure certificate attached: ⁵ Yes <input type="checkbox"/> No <input type="checkbox"/>

⁴Please also state your maiden name or any other surnames you have previously been known by.

⁵Further information about Basic Disclosure Certificates and Disclosure Scotland are set out in the explanatory notes accompanying this form.

<p><i>Site 2</i></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>Place of birth:</p> <p>Basic Disclosure certificate attached:</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>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:</p> <p>Address:</p> <p>Postcode:</p> <p>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:</p> <p>Please continue on a separate sheet of paper if necessary.</p>	
<p><i>Only applicable to sites established after 1 November 1990</i></p> <p>Do you have planning permission (please tick)</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
<p>I have attached a plan showing the location and extent of each site in St. Helens that I wish to be authorised under this application. (please tick)</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If you do not provide a plan your application may be delayed or rejected.</p>	

SECTION 3. TO BE COMPLETED IF APPLYING FOR A COLLECTOR'S LICENCE
N.B - A St. Helens collector's licence authorises the licensee to carry out business as a mobile collector only within St. Helens.

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): Surname:	I am 18 years old or over. Please tick Yes <input type="checkbox"/> No <input type="checkbox"/> Date of birth: Place of birth: Forenames:
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Please also state your maiden name or any other surnames you have previously been known by:

I attach a Basic Disclosure Certificate issued for the applicant by Disclosure Scotland⁶:

Yes No

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)

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

⁶ Further information about Basic Disclosure Certificates and Disclosure Scotland are set out in the explanatory notes accompanying this form.

SECTION 5. 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.

Name of bank:

Name of bank:

Account name:

Account name:

Sort code:

Sort code:

Account number:

Account number:

SECTION 6. PAYMENT (For all applicants)

I have enclosed the fee with this application

Yes No

N.B. The full fee for a Licence in St. Helens is payable at the time of application.

Acceptable methods of payment are cash, cheque (payable to St. Helens Council) Postal Orders, debit card or credit card.

SECTION 7. CRIMINAL CONVICTIONS (For all applicants)

Have you, any listed partners, any listed directors, 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?

Yes No

Each person named on this application must complete the disclosure of convictions declaration.

SECTION 8. 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, the Natural Resources Body for Wales, and the Police.

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: _____ Date: _____

Print name _____ I have enclosed a photo Yes No

Signed: _____ Date: _____

Print name _____ I have enclosed a photo Yes No

Signed: _____ Date: _____

Print name _____ I have enclosed a photo Yes No

Signed: _____ Date: _____

Print name _____ I have enclosed a photo Yes No

Signed: _____ Date: _____

Signed:	Date:
Print name _____	I have enclosed a photo Yes <input type="checkbox"/> No <input type="checkbox"/>

All applications should be made to: The Licensing and Land Charges Unit, St. Helens Council, Wesley House, Corporation Street, St. Helens WA10 1HF e-mail licensing@sthelens.gov.uk

Privacy Policy

Here at St. Helens Council we take your privacy seriously. We will only use your personal information to administer your application and provide the products and services you have requested from us.

From time to time we may need to contact you with details of the service or information we require from you and we will do this using the contact information you provided on your application form. This can either be by post, email, telephone or text message.

The Council has a duty to protect the public and we implement a number of security measures to maintain the safety of your personal information. Please be aware however that the information you provide on this application may be shared with other public bodies where required, such as Council Departments and Government Services, which may be used for the prevention of fraud or other serious offences.

If you require a copy of the data we hold or believe it to be inaccurate please contact the Council's Data Protection Officer by email on dataprotection@sthelens.gov.uk.

Any further information held by the Council about individuals will be held securely and in compliance with the law. Information will not be held for longer than required and will be disposed of securely. Further information regarding retention periods is available on the Council's website at <https://www.sthelens.gov.uk/Licensing>.