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Gloucester
City Council
Transforming Your City

Scrap Metal Dealers Act 2013

Application to vary a Scrap Metal Dealer's Licence

SECTION 1. (for a	ii applicants)			
Existing licence num	ber:			
Type of variation: (pl	Type of variation: (please tick)			
£ Vary a collectors	£ Vary a collectors licence to a site licence			
£ Vary a site liceno	ce to a collectors licence			
£ Change of name	or address of the licensee			
£ Add a site on you	ur licence			
£ Remove a site or	n your licence			
£ Change details of	of a site(s) on your licence			
£ Change a site ma	anager			
SECTION 2. APPI	LICANTS DETAILS (current details)			
Name:				
Address:				
City:				
Post Code:				
Telephone No:				
Email:				

SECTION 3. VARY A COLLECTORS LICENCE TO A SITE LICENCE

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.

Site details.

Please list the details for each site where you to propose to carry on business as a scrap metal dealer in this local authority area. 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 a licensing authority area, 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	
Site 1 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: Basic Disclosure certificate attached: Yes £ No £ 1	
Site 2 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: Basic Disclosure certificate attached: Yes £ No £	
vvedsite address:	Yes t No t	

¹ If you do not provide a disclosure certificate issued for named persons by the Disclosure & Barring Service issued no more than one month 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:			
Address:			
Postcode:			
Please name the local authority which has licensed this site, or to whom applications have been made: Please continue on a separate sheet if necessary.			
Only applicable to sites established after 1 November	1990		
Do you have planning permission (please tick)			
Yes £ No £			
SECTION 4. VARY A SITE LICENCE TO A COL	LECTORS LICENCE		
N.B – A collector's licence authorises the licenses authority's area only	to carry out business as a mobile collector in the		
Contact details (we will use your business address to use your home address).	correspond with you unless you indicate we should		
Business Address:	Telephone numbers:		
House name or number:	Daytime:		
	Evening:		
First line of address:	Mobile:		
Town/City:	Email·		

First line of address: Town/City: Postcode: Home address: House name or number: First line of address: Town/City: First line of address: Town/City: Postcode: (Please note that you must still provide us with a postal address)

Vehicle details:

If you have more than 4 vehicles, please provide details for each vehicle on a continuation sheet.

How many vehicles will be used in your business as a collector?					
Vehicle 1:			Vehicle 2:		
Vehicle Registration No:			Vehicle Registration No:		
MOT expiry date:			MOT expiry date:		
Insurance expiry date:			Insurance expiry date:		
Vehicle 3:			Vehicle 4:		
Vehicle Registration No:			Vehicle Registration No:		
MOT expiry date:			MOT expiry date:		
Insurance expiry date:			Insurance expiry date:		
Driver Details:					
Full Name	Date of Birth	Reside	ntial Address	Relevant Convictions	

Where will scrap metal that has been purchased be stored before further disposal?			
House name or number:			
First line of address:			
Town/City:			
Postcode:			
SECTION 5. MOTO	OR SALVAGE		
Will your business co	onsist of acting as a motor salvag	e operator? This is defined as a business that:	
 Wholly or in part recovers salvageable parts from motor vehicle 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; Wholly or mainly buys or sells motor vehicles for the purpose of salvaging parts from them or repairing them and selling the off. 			
(please tick)			
Yes £ No £			
SECTION 6. CHAN	IGE OF NAME/ADDRESS OF	LICENCE HOLDER	
Current Name:		New Name:	
Current Address:		New Address:	
Contact Tel No:			
Email Address:			

SECTION 7. ADD A SITE(S) Site Details. Please list details for each new site. If you wish to add more than two sites in the area please provide details for each site on a continuation sheet. (N.B - Provision should be made for more than one site manager Full address of each additional site you intend to Site manager(s) details carry out business as a scrap metal dealer Site 1 Name: Name or number: House name or number: First line of address: First line of address: Town/City: Town/City: Postcode: Postcode: Telephone number: Date of Birth: Email address: Basic Disclosure certificate attached: Yes f No £ 1 Website address: Site 2 Name: Name or number: House name or number: First line of address: First line of address: Town/City: Town/City: Postcode: Postcode: Telephone number: Date of Birth: Basic Disclosure certificate attached: Email address: Yes £ Website address: No £

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SECTION 8. REMOVE A SITE(S)		
Site details.		
Please list the details for each site which you wish to remove. If you wish to remove more than two sites in the area please provide details for each site on a continuation sheet.		
Site 1		
Name or number:		
First line of address:		
Town/City:		
Postcode:		
Telephone number:		
Current Site Manager:		
Site 2		
Name or number:		
First line of address:		
Town/City:		
Postcode:		
Telephone number:		
Current Site Manager:		
SECTION 9. CHANGE OTHER DETAILS OF A SITE(S) ON YOUR LICENCE		
OLD DETAILS	NEW DETAILS	
Site 1		

Site 2

SECTION 10. CHANGE OF SITE MANAGER		
Site 1 - Name and Address	Current Site Manager Name:	
	New site Manager details:	
	Name:	
	House name or number:	
	First line of address:	
	Town/City:	
	Postcode:	
	Date of Birth:	
	Basic Disclosure certificate attached:	
	Yes £ No £ 1	
Site 2 - Name and Address	Current Site Manager Name:	
	New site Manager details:	
	Name:	
	House name or number:	
	First line of address:	
	Town/City:	
	Postcode:	
	Date of Birth:	
	Basic Disclosure certificate attached:	
	Yes £ No £ 1	

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SECTION 11. CRIMINA	L CONVICTIONS (For a	ll applicants)		
	ners, any listed directors or a ence or been the subject of			
Yes £ No £				
	letails for each conviction, the of which you were convicted			d location of the
Details of conviction	Name & location of court	Offence	Sentence	imposed
SECTION 12. CHECKL	IST & DECLARATION (F	or all applicants)		
Have you enclosed the following (tick)				
Appropriate Fee (£235.00)				
, ,	than 1 month old where applic	able		
'''	or a change of name/address			
Original scrap metal dealers	licence			
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 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:		
Signed:		Date:		
Signed:		Date:		