

Application for registration to act as a scrap metal dealer



Scrap Metal Dealers Act 1964

▪ **Type of Application**

First Grant

Renewal of Existing Registration

Registration No.

SMD

Please send completed applications to:-

Wigan Council, Licensing Section, Town Hall, Library Street, Wigan, WN1 1YN

Please Note: If you have any questions about the application processes please contact the Licensing Section on (01942 404627) or by e-mail at licensing@wigan.gov.uk.

Please complete the application in full using block capitals and in black ink. If you make a mistake please place a line through it and initial it. Applications will not be accepted where correction fluid (e.g. Tippex) has been used.

I apply to Wigan Council to be entered in the register of persons carrying on the business in the area of the council as a scrap metal dealer, under the provisions of the Scrap Metal Dealers Act 1964.

In making this application, I understand that if for the purpose of obtaining such registration I make any false statement or omit any material particular, I shall be guilty of an offence and liable to prosecution.

Please answer the following by placing a tick ✓ in the appropriate box:-

- a) I do not occupy a place within the area of Wigan Council as a scrap metal store, but my usual place of residence is within the area of Wigan Council please complete box (A)
- b) I am applying as a body corporate please complete box (B)
- c) I occupy a place within the area of Wigan Council as a scrap metal store please complete boxes (A), (B) & (C)
- d) I do not occupy a place within the area of Wigan Council as a scrap metal store but I occupy a place in the Council's area wholly or partly for the purposes of acting as a scrap metal dealer. please complete boxes (A), (B) & (D)

A Applicants Details: (this must be your usual place of residence)

| | | |
|---|---------------|---|
| 1 | Title (✓ box) | Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> |
| 2 | Surname | <input type="text"/> |
| 3 | Forename(s) | <input type="text"/> |
| 4 | Home Address | <input type="text"/> |
| 5 | Town | <input type="text"/> |
| 6 | Postcode | <input type="text"/> |
| 7 | Telephone No. | <input type="text"/> |
| 8 | Email | <input type="text"/> |
| 9 | Date of Birth | <input type="text"/> |

B Applicants details if a body corporate

| | | |
|---|--------------------------|----------------------|
| 1 | Name of Company | <input type="text"/> |
| 2 | Registered Address | <input type="text"/> |
| 3 | Town | <input type="text"/> |
| 4 | Postcode | <input type="text"/> |
| 5 | Telephone No. | <input type="text"/> |
| 6 | Company Registration No. | <input type="text"/> |
| 7 | Email | <input type="text"/> |

| C | | Please give details of the place that you occupy or part occupy as a scrap metal store | | | | | | | | | | | | | | | |
|----------|--------------------------|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1 | Trading Name (if any) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Address | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | Town | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 4 | Postcode | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 5 | Telephone No. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| D | | Please give details of the place that you occupy for the purposes of carrying on the business as a scrap metal dealer | | | | | | | | | | | | | | | |
|----------|--------------------------|--|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1 | Trading Name (if any) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Address | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | Town | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 4 | Postcode | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 5 | Telephone No. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

For the purposes of this application:

“Place” includes any land, whether consisting of enclosed premises or not.

“Scrap metal” includes any old metal, and any broken, worn out, defaced or partly manufactured articles made wholly or partly of metal, and any metallic wastes and also includes old, broken, worn out or defaced tooltips or dies made of any of the materials commonly known as hard metal or of cemented or sintered metallic carbides.

“Scrap metal store” means a place where scrap metal is received or kept in the course of the business as a scrap metal dealer.

Important

Please note that the information contained within this application will be made available on request to any Police Officer in order that he/she can exercise the powers granted under the Scrap Metal Dealers Act 1964 to enter and inspect any place occupied by a scrap metal dealer as a scrap metal store or to require the production of and to inspect any book required to be kept under the Act.

Caution

You are warned that the making of a false statement for the purposes of registration is an offence.

I declare that I have checked the information given in this application form and it is correct to the best of my knowledge and belief.

*If signing on behalf of a Company or Partnership please state in what capacity.

Signed

Print Name

Position

| | | | | | | | | |
|------|---|---|---|---|---|---|---|---|
| Date | d | d | m | m | y | y | y | y |
|------|---|---|---|---|---|---|---|---|