Application for an environmental permit Part A – About you



You will need to fill in this part A if you are applying for a new permit, applying to change an existing permit or want to transfer an existing permit to yourself. Please check that this is the latest version of the form available from our website.

Please read through this form and the guidance notes that came with it. Please write clearly in the answer spaces.

Note: if you believe including information on a public register would not be in the interests of national security you must tick the box in section 5 of F1 or F2 and enclose a letter telling us that you have told the Secretary of State/Welsh ministers. We will not include the information in the public register unless directed otherwise. It will take less than one hour to fill in this part of the application form.

Where you see the term 'document reference' on the form, give the document references and send the documents with the application form when you've completed it.

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1 About you

Are you applying as an individual, an organisation of individuals (for example, a partnership), a company (this includes Limite	ed
Liability Partnerships) or a public body?	

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An individual

An organisation of individuals (for example, a partnership)

A public body

A registered company or other corporate body

2 Applications from an individual

2a Please give us the following details

Name

Title (Mr, Mrs, Miss and so on)

First name

Last name

Date of birth (DD/MM/YYYY)

Now go to section 6

3 Applications from an organisation of individuals

3a Type of organisation

For example, a charity, a partnership, a group of individuals or a club

3b Details of the organisation

If you are an organisation of individuals, please give the details of the main representative below. If relevant, provide details of other members (please include their title Mr, Mrs and so on) on a separate sheet and tell us the document reference you have given this sheet.

Contact name

Title (Mr, Mrs, Miss and so on)

First name

3	Applications from an organisation of individuals, continued			
Last name		L]		
Date of birth (DD/MM/YYYY)				
Now	Now go to section 6			
4	Applications from public bodies			
4a For e	Type of public body xample, NHS trust, local authority, English county council			
4b	Name of the public body			
4c An of	Please give us the following details of the executive fficer of the public body authorised to sign on your behalf			
Nam	e			
Title	(Mr, Mrs, Miss and so on)			
First	name	LJ		
Last	name	١ا		
Posit	ion	L]		
Now	go to section 6			
5	Applications from companies or corporate bodies			
5a	Name of the company	١ا		
5b	Company registration number	L]		
Date of registration (DD/MM/YYYY) If you are applying as a corporate organisation that is not a limited company, please provide evidence of your status and tell us be the reference you have given the document containing this evidence.		ompany, please provide evidence of your status and tell us below		
Document reference Now go to section 6		L]		
6	Your address			
For c	Your main (registered office) address ompanies this is the address on record at Companies House. act name			
Title	(Mr, Mrs, Miss and so on)			
First	name	11		
Last	name	LJ		
Addr	ess	LJ		
		LJ		
Post	code			
Contact numbers, including the area code				
Phor	e			
Fax				
Mobile				
Emai	l			

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6 Your address, continued

For an organisation of individuals every partner needs to give us their details, including their title Mr, Mrs and so on. So, if necessary, continue on a separate sheet and tell us below the reference you have given the sheet.

Document reference for the extra sheet	١١
6b Main UK business address (if different from above)	
Contact name	
Title (Mr, Mrs, Miss and so on)	
First name	L
Last name	L
Address	L
	L
	L
Postcode	
Contact numbers, including the area code	
Phone	L
Fax	
Mobile	
Email	

Now go to section 7

7 **Contact details**

7a Who can we contact about your application?

This can be someone acting as a consultant or an 'agent' for you. Contact name

Title (Mr, Mrs, Miss and so on)

First name

Last name

Address

Postcode

Contact numbers, including the area code

Phone

Fax

Mobile

Email

7 Contact details, continued

7b Who can we contact about your operation (if different from question 7a)?

Contact name	
Title (Mr, Mrs, Miss and so on)	
First name	L]
Last name	LJ
Address	L
	L
	L
	L
Postcode	
Contact numbers, including the area code	
Phone	L
Fax	L
Mobile	L
Email	L
	L
7c Who can we contact about your billing or invoice?As in question 7aAs in question 7bPlease give details below if different from question 7a or 7b.Contact nameTitle (Mr, Mrs, Miss and so on)First nameLast nameAddress	
Postcode	
Contact numbers, including the area code	
Phone	
Fax	
Mobile	
Email	

8 How to contact us

If you need help filling in this form, please contact the person who sent it to you or contact us as shown below.

General enquiries: 03708 506 506 (Monday to Friday, 8am to 6pm)

Textphone: 03702 422 549 (Monday to Friday, 8am to 6pm)

Email: enquiries@environment-agency.gov.uk

Website: www.environment-agency.gov.uk

If you are happy with our service, please tell us. It helps us to identify good practice and encourages our staff. If you're not happy with our service, please tell us how we can improve it.

Please tell us if you need information in a different language or format (for example, in large print) so we can keep in touch with you more easily.

Feedback

(You don't have to answer this part of the form, but it will help us improve our forms if you do.)

We want to make our forms easy to fill in and our guidance notes easy to understand. Please use the space below to give us any comments you may have about this form or the guidance notes that came with it.

How long did it take you to fill in this form?	
We will use your feedback to improve our forms and guidance notes	s, and to tell the Government how regulations could be
made simpler.	
Would you like a reply to your feedback?	
Yes please	

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No thank you

Crystal Mark 19101 Clarity approved by Plain English Campaign

For Environment Agency use only

Date received (DD/MM/YYYY)

Our reference number

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Payment re	ceived?	
No 🗆		
Yes 🗌	Amount received	
£	1	1