



**Fill in this part A if you are applying for a new permit, applying to change or surrender 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 come with it. All relevant guidance documents can be found on our website.

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 Limited Liability Partnerships) or a public body?

- |   |                                     |                        |
|---|-------------------------------------|------------------------|
| An individual   | <input type="checkbox"/>            | <i>Go to section 2</i> |
| An organisation of individuals (for example, a partnership) | <input type="checkbox"/>            | <i>Go to section 3</i> |
| A public body (such as a local council)                     | <input checked="" type="checkbox"/> | <i>Go to section 4</i> |
| A registered company or other corporate body                | <input type="checkbox"/>            | <i>Go to section 5</i> |

## 2 Applications from individuals

### 2a Please give us the following details

Title

First name

Last name

*Go to section 6*

## 3 Applications from organisations of individuals

### 3a Organisation details

Organisation name

Type of organisation

If 'Other', please specify

### 3b Main representative's details

Title

First name

Last name

**3c Second representative's details:**

Title

First name

Last name

**3d Other representative's details**

If relevant, please provide details of all other representatives on a separate sheet and tick here to show that you have done so.

☐

*Go to section 6*

**4 Applications from public bodies**

**4a Public body details**

Public body name

Flintshire County Council

Type of public body

Unitary authority

If 'Other', please specify

**4b Executive officer's details**

The executive is an officer of the public body authorised to sign on your behalf.

Title

Mr

First name

Stephen

Last name

Jones

Position

Chief Officer

*Go to section 6*

**5 Applications from a registered company or other corporate body**

**5a Company details**

Company name

Company registration number

Date of registration

If you are applying as a corporate organisation that is now a limited company, please provide evidence of your status and tell us the reference number you have given this document with this evidence.

Document reference

*Go to section 6*

**6 Your address**

**6a Your main (registered office) address**

For companies this *must* be the address on record at Companies House.

Address

Flintshire County Council

County Hall

	<input type="text" value="Raikes Lane"/>
	<input type="text" value="Mold"/>
Postcode	<input type="text" value="CH7 6NA"/>
Telephone - mobile	<input type="text"/>
Telephone - office	<input type="text" value="01352 701234"/>
Email address	<input type="text" value="Stephen.O.Jones@flintshire.gov.uk"/>

If you are applying as an organisation of individuals, every partner needs to give us their details, including their title. If necessary, continue on a separate sheet and tell us the reference you have given the sheet.

Document reference	<input type="text"/>
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**6b UK business address *only* if different from above**

Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Postcode	<input type="text"/>
Telephone - mobile	<input type="text"/>
Telephone - office	<input type="text"/>
Email address	<input type="text"/>

*Go to section 7*

**7 Contact details**

**7a Who can we talk to about your application?**

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

Title	<input type="text" value="Mrs"/>
First name	<input type="text" value="Gabrielle"/>
Last name	<input type="text" value="Povey"/>
Address	<input type="text" value="Flintshire County Council"/>
	<input type="text" value="Altami Depot"/>
	<input type="text" value="Mold Road"/>

	<input type="text" value="Alltami"/>
Postcode	<input type="text" value="CH7 6LG"/>
Telephone - mobile	<input type="text"/>
Telephone - office	<input type="text" value="01352703347"/>
Email address	<input type="text" value="Gabrielle.povey@flintshire.gov.uk"/>

**7b Who can we talk to about your operation?**

Same as the application contact in 7a	<input checked="" type="checkbox"/>
Title	<input type="text"/>
First name	<input type="text"/>
Last name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Postcode	<input type="text"/>
Telephone - mobile	<input type="text"/>
Telephone - office	<input type="text"/>
Email address	<input type="text"/>

**7c Who can we talk to about your billing or invoice?**

Same as the application contact in 7a	<input checked="" type="checkbox"/>
Same as the operation contact in 7b	<input type="checkbox"/>
Title	<input type="text"/>
First name	<input type="text"/>
Last name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>

Postcode

Telephone - mobile

Telephone - office

Email address

