



OZONE DEPLETING SUBSTANCES REGULATIONS 2010

FORM 5

DEPARTMENT OF ENVIRONMENT

APPLICATION FOR PERMIT TO IMPORT CONTROLLED SUBSTANCES

(Section 16(3) of the Act and Regulation 10(1))

Part A – Applicant details

1. Full name _____

2. Name and address of place of business _____

3. Residential address _____

4. Telephone Home _____ Work _____
 Mobile _____ Fax _____

5. E-mail _____

6. (If applying on behalf of a company or partnership)

(a) Position in the company or partnership _____

(b) Name and registered address of the company or partnership _____

(c) Describe type of business (including any other business operating under the above management)

7. Is the applicant applying for the first time? YES/NO

Part B – Nature of the application

Proposed date of importation: _____

Type of container: _____

Countries of origin: _____

Type of carrier – ship/aircraft _____

Name of vessel/agent : _____

Proposed destinations in Fiji: _____

Controlled Substances

Pure chemicals (use chemical code names)

Controlled substance	Requested quantities (kg)	Trade Name	Country of origin	*Intended use
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Mixtures (state chemical code names)

Trade name	Chemical composition (% of each controlled substance)	Requested quantities (kg)	Country of origin	*Intended use
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Part C – Other information

Provide any additional information which the applicant: considers necessary for this application

Part D – Conditions of application

1. The applicant must complete this Form and send 2 copies to the Department of Environment.
2. The applicant will be notified within 14 days of the result of the application. A fee of \$1 per kg. is also payable on lodgement of application.
3. The permit must be displayed in a conspicuous place at the place of business
4. A permit is not transferable and can only be used in respect of the shipment for which it is issued.

Declaration

I, _____ (the applicant) declare that the information provided in this application is true and accurate and I fully understand the conditions of this application.

Signed _____
Applicant

Date _____

Part E (Official use only)

Permit No: _____

Quota No: _____

The information provided in this application has been checked and found:

Accurate _____

Inaccurate _____

I recommend that a permit to import Controlled Substances be issued/not issued to
_____ (applicant) for the shipment stated below.

Signed _____

Director of Environment

Date _____
