



OZONE DEPLETING SUBSTANCES REGULATIONS 2010

FORM 9

DEPARTMENT OF ENVIRONMENT

APPLICATION TO RENEW A LICENCE OR PERMIT IN RESPECT OF CONTROLLED SUBSTANCES

(Sections 15, 16 and 17 of the Act and Regulation 13)

Part A – Applicant details

1. Full name_____

2. Name of employer_____

3. Name and address of place of business_____

4. Residential address_____

5. Telephone Home_____ Work_____

 Mobile_____ Fax _____

6. E-mail_____

7. (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)

Part B – Details of the licence or permit

Licence/permit number_____

Type of licence/permit_____

Date of expiry_____

Declaration

I, _____ (applicant) declare that all conditions of the licence/permit have been met. I hereby apply for renewal of the above licence/permit in respect of the following activities in relation to Controlled Substances.

Please tick as appropriate:

- ☐ I enclose a renewal fee of \$12.00 for licence
☐ I enclose a renewal fee of \$10.00 for permit

Signed _____
Applicant

Date _____

Part C (Official use only)

Licence/Permit No. _____

Date renewal application received _____

Status of application: Rejected / Accepted

If application accepted

The licence/permit is renewed for a further period from _____ to _____

Conditions attached (if any): _____

If application rejected

Grounds for rejection: _____

Recommendation to applicant (if any): _____

Signed _____
Director of Environment

Date _____
