

## APPLICATION FORM AUCKLAND COUNCIL WASTE MANAGEMENT AND MINIMISATION BYLAW 2019 WASTE FACILITY LICENCE

Application to Auckland Council to operate a waste facility within the Auckland Council area.

One application form per Waste facility please.

(Any enquiries please phone Auckland Council on 09 301 0101, or email Waste.Licensing@aucklandcouncil.govt.nz)

Details of Applic	cant						
Company Name:	:						
Registered Address:							
E-mail address:							
Applicants daytime contact name and telephone number:							
Postal address for service of documents:							
Name of Manage	er respo	nsible:	-				
Details of Waste	e Mana	gement Facility					
Type of facility to	be ope	erated under the lice	nce (√	appropriate box or t	oxes	) <i>:</i>	
Landfill 📮	Ma	naged fill	Tron	sfer Station	1	Compost site	
		3				Compost site	_
Recycling Facility	<i>y</i> <b>ப</b>	Other (please s	pecily)				
Name and address of facility to be licensed:							
		•					
Type of material	accepte	ed under the licence	(√appr	opriate box or boxe	s)		
Household		Recyclables		Green Waste		Paper Waste	П
Inorganic		Prohibited		Hazardous		Commercial	
•							
Tyres		E – Waste		ner (please specify) _			
				petween 5 years and ork for all so please c			ot affect
Application perio	d: Fro	om: Aug 1		To: July 31			

## Declaration

I / we agree to fulfil the reporting requirements on waste data and that the information provided is correct and accurate.

The person completing this application must be authorised, in writing, to act as a signatory on behalf of the applicant.

	pecific information received will be treated as confidential and subject to Local official Information and Meetings Act (1987) (LGOIMA) requirements.
Signature of Applicant	: Date:
Title of Applicant:	
	For Office Use Only
Receipt Number:	Amount:
Date:	Officer:
Licence Number:	Bond Amount Required:

## **CHECKLIST FOR APPLICANTS**

Please provide the following information as outlined in Part 3 Subpart 2 of the Waste Management and Minimisation Bylaw 2019:

1.	Does the facility have a Health & Safety Plan? (Attach a copy)
2.	Does the facility have a Quality Management Plan? (Submit a copy of the "Table of
	Contents").
3.	Does the facility have all necessary consents to operate from both local and regional
	authorities? (Attach a list of all consents).
4.	Description of the operation of the facility – general overview of waste materials
	accepted, and how quantities of incoming and outgoing waste types are identified
	(reporting your waste volumes is a central obligation of the licence agreement)
5.	Description of how the operation of the facility is contributing to the objectives of
	Council's Waste Management Plan (Attach a paragraph).
6.	What is the treatment (if any) for the waste that is intended to be received? (Attach
	details of treatment for each type of waste to be collected).
7.	Provide details of applicants experience, reputation and track record in the waste
	industry (Attach a paragraph).
8.	Provide details of past operational issues affecting performance (Attach as
	appropriate).
9.	Provide details of financial position e.g. letter from bank or other financial institution
	indicating solvency (This is to confirm the ability of the applicant to satisfy the
	conditions of the licence).
10.	Provide certificates of public liability insurance (A certificate from a broker is sufficient).
11.	Details of key contact person during term of licence - email, physical address and
	mobile numbers.

## **CHECKLIST FOR RECEIVING OFFICER**

Health & Safety Plan.
Quality Management Plan "Table of Contents".
Necessary Consents
Objectives of Council's Waste Management Plan.
Waste treatment details.
Applicants experience, reputation and track record.
Any past operational issues affecting performance.
Financial position.
Certificates of public liability and vehicle insurances.
Bond assessed.
Licence issued.

Please ensure you complete all paperwork before returning to Waste.Licensing@aucklandcouncil.govt.nz