

## Form IPPC Part A – application for a permit, variation, transfer or surrender

### For Malta Environmental Planning Authority Use Only

Date received      Fee received: Yes   No      Amount received      Name assigned to installation

☐☐

## Application for a permit, variation, transfer or surrender

### Integrated Pollution Prevention and Control

Integrated Pollution Prevention and Control Regulations 2002

## Introduction to Part A

### When to use this form

Use this form if you are sending an application to the MEPA under the Integrated Pollution Prevention and Control Regulations 2002 ('the IPPC Regulations').

The form is to be used for applications made in respect of both 'installations' and 'mobile plant' (and in the rest of the form, the term 'installation' also covers 'mobile plant' where appropriate).

### Before you start to fill in this form

There may be two or more operators in a single installation. Each operator will need a permit, each obtained by a separate application. Your applications will principally relate to the part of the installation under your control, but will also need to include some information on the rest of the installation. This will help us to assess the operation of the whole installation. The term "installation", when used in this application form (and elsewhere) may refer to either the whole or part of the installation, depending on the nature of the information we are seeking to obtain.

### Which parts of the form to fill in

The form is in six parts but we usually only send you the parts you need to fill in. Everyone has to fill in Part A, and complete and sign Part F at the end of their application. The other parts you need to fill in depends on the type of application you are making:

- To apply for a new permit – fill in Parts A and B then Part F,
- To vary an existing permit – fill in Parts A and C then Part F,
- To transfer all or part of an existing permit to someone else – fill in Parts A and D then Part F. This should be a joint application by the transferor and the transferee,
- To surrender all or part of an existing permit – fill in Parts A and E then Part F.

### Other documents we need to see

There are a number of other documents you will need to send us with your application. Each time a request for documents is made in the application form you will need to record a document reference number for the document or documents that you are submitting in the box provided on the form for this purpose.

Please also mark the document(s) clearly with this reference number and either the application reference number if you know it or your existing permit number. If you do not have either of these, please use the name of the installation.

If you know your Application Reference Number, please enter it into the box below:

### Using continuation sheets

In the case of questions required to be answered on the application form itself, please use a continuation sheet if you need extra space; but please indicate clearly on the form that you have done so by stating a document reference number for that continuation sheet. Please also mark the continuation sheet itself clearly with the information referred to above.

### If you need help and advice

We have made the application form as straightforward as possible, but please get in touch with us if you need any advice on how to set out the information we need.

Please get in touch with us on 2167 6395



## A1 About your application

### A1.1 What type of application are you making?

- ☒ new permit  
☐ variation of an existing permit  
☐ transfer of an existing permit  
☐ surrender of an existing permit

### A1.2 Name of the installation

INCINERATOR AT THE PUBLIC ABATTOIR

Please tell us if this name is:

- ☒ already agreed with the MEPA; or  
☐ one that you are proposing.

### A1.3 Please give the address of the site of the installation, and a map or plan showing the site of the installation and the location of the installation on the site

Street Address	FOOD AND VETERINARY REGULATION DIVISION ALBERTOWN	
Locality	MARSA	Post Code HMR 16

### A1.4 Give details of any existing permit(s) for the installation.

Please give details of any applicable waste management licences or water discharge consents.

Permit number(s), type(s) and date(s) of issue:

Application PA2201/01  
"To install an incineration unit and adjacent cold store within incineration site at public abattoir to meet EU standards."  
Status 25/11/2005  
OCC Decision Pending  
Hearing date to be announced shortly. OPA report recommended that permission be granted.

## A2 Authorised contacts

It will help us to have someone who we can contact directly with any questions about your application. The person you name should have the authority to act on your behalf.

### A2.1 Who can we contact about your application?

This could be an agent rather than the operator.

Name

PAUL FENECH GONZI

Position

DIRECTOR, Programme Implementation

Address

Street Address Ministry for Rural Affairs  
and the Environment  
Civil Abattoir

Locality MARSA

Post Code HMR 16

Phone number +356 21 225 363

Fax number +356 21 238 105

Email address Paul.fenech-gonzi@gov.mt

### A2.2 Operational contact

If different to the above, please identify the person we should contact to discuss operational matters on an ongoing basis.

Name

MARY GRACE MICALF

Position

WASTE TREATMENT ENGINEER

Address

Street Address Waste Serv Malta Ltd.  
Phoenix Building  
Old Railway Track

Locality STA VENERA

Post Code

Phone number +356 2385 8000

Fax number +356 21 441 930

Email address mmicalf@wasteservmalta.com

## A3 About the operator

Please provide the information requested below about the 'operator', which means:

- for applications for a new permit – the person who it is proposed will have control over the installation in accordance with the permit (if granted),
- for applications for a variation, transfer or surrender – the person who currently has control over the installation in accordance with the permit.

If you are applying for a transfer, we will ask for more information relating to the proposed new operator (transferee) in Part D.



### A3 About the operator *continued*

#### Legal status of operator

**A3.1** Is the operator an individual, a group of individuals, a partnership or a company/corporate body?

- ☐ Individual (sole trader) or group of individuals go to question A3.2.  
☐ Partnership go to question A3.3.  
☒ Company or corporate body go to question A3.5.

#### Individual applicants

**A3.2** Please give us the following details.

Where more than one person is applying (other than as a partnership) we need details of each person.

Continue on separate sheets if necessary.

Full name

Date of birth

Trading/business name (if any)

Business address

Street Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Locality	<input type="text"/>	Post Code	<input type="text"/>

Contact numbers

Phone number
Fax number
Email address

Now go to question A4, What to do next.

#### Applications from partnerships

**A3.3** Who is applying?

We can only issue permits to named individuals, not to a partnership name. We therefore need details of each person in the partnership.

Continue on separate sheets if necessary.

**Person**

Full Name

Date of Birth

Principal place of business

Street Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Locality	<input type="text"/>	Post Code	<input type="text"/>

### A3 About the operator *continued*

Contact numbers

Phone number
Fax number
Email address

**Person**

Full Name

Date of Birth

Principal place of business

Street Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Locality	<input type="text"/>	Post Code	<input type="text"/>

Contact numbers

Phone number
Fax number
Email address

**Person**

Full Name

Date of Birth

Principal place of business

Street Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Locality	<input type="text"/>	Post Code	<input type="text"/>

Contact numbers

Phone number
Fax number
Email address

**A3.4** Please give us the following details about the partnership.

Name of partnership (if there is one)

Principal place of business

Street Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Locality	<input type="text"/>	Post Code	<input type="text"/>



### A3 About the operator *continued*

Contact numbers

Phone number

Fax number

Email address

Now go to question A4, What to do next.

### Companies or other corporate applicants

**A3.5 Please give us the following details.**

Full name of company or corporate body

FOOD AND VETERINARY REGULATION

Trading/business name (if different)

DIVISION

Registered office address

Street  
Address

ALBERTOWN

Locality

MARLSA

Post Code

HMR 16

Principal office address (if different)

Street  
Address

Locality

Post Code

Company registration number

Date of formation of company

- For applications from companies, please provide a copy of the certificate of incorporation and any certificates of subsequent name changes.

Document reference number

- For applications from other corporate bodies, please provide evidence of status.

Document reference number

SEE APPENDIX 18

OF APPLICATION DOCUMENT

### A3 About the operator *continued*

**A3.6 Is the operator a subsidiary of a holding company?**

No ☒

Yes ☐ name of ultimate holding company

Registered office address

Street  
Address

Locality

Post Code

Principal office address (if different)

Street  
Address

Locality

Post Code

Company registration number

### A4 What to do next

Now you need to fill in the other Parts of this form we sent you.

If you are applying for

- A new permit – fill in Part B then go to Part F, ✓
- A variation – fill in Part C then go to Part F,
- A transfer – fill in Part D then go to Part F,
- A surrender – fill in Part E then go to Part F.