



**Application to Operate a Prescribed Installation:**

The Burning of Waste Oil in an Appliance with a Rated Thermal Input of less than 3 Megawatts as Defined in Part B Section 1.1 of Schedule 1 of the Pollution Prevention and Control (England and Wales) Regulations 2000 (as amended)

**1. Name and Address of Applicant:**

.....  
..... **Post Code** .....

**Contact Name:** ..... **E-Mail** .....

**Position:** ..... **Telephone No:** .....

**2. Name and Registered office of applicant Company, In the case of parterships, names and home addresses of the partners:**

.....  
..... **Post Code** .....

**Contact Name:** ..... **Position:** ..... **Telephone No:** .....

**3. Address of premises where process is/will be carried out:**

.....  
..... **Post Code** .....

**4. Enclose a map/plan with the application showing the location of the premises where the appliance(s) will, or is installed.**

**5. Make and model, (name/number) of the appliance(s):**

.....**Serial No.** .....

**6. What is the net rated thermal input of the appliance(s)?:** .....

**7. What fuel will be burned on the appliance(s)?**

.....

**8. What is the source of the fuel?** .....

**9. What is the height and location of the chimney serving the appliance(s)?:**

**(a) from the ground?:** .....

**(b) from the nearest building?:** .....

**P.T.O.**

10. Where are the fuel storage tank vents located?:

.....  
.....

11. Is the Appliance (s) designed to be refuelled whilst lit? .....

Fee enclosed (cheques to be made payable to South Norfolk Council) £ .....

I hereby certify that I am authorised to sign this application and all the information contained in this application is correct to the best of my knowledge.

Name(BLOCK CAPITALS): .....

Signature: .....

Designation: .....

Date: .....