

Development & Regulatory Services (DRS)

Building 4, North London Business Park
Oakleigh Road South
London N11 1NP

contact: Rita Zippo
tel: 020 8359 7644
e-mail: rita.zippo@barnet.gov.uk
fax: 0870 889 7459
date:

Dear Sir/Madam,

Re: Registration of Skip Companies and Approved List of Contractors

In line with Barnet Council's promise to improve services to residents and businesses, we register all skip companies that operate within the borough to produce an approved list of contractors.

As a result skip companies will need to register with us providing the information we require to produce the approved list. The list will be compiled and will be made available to members of the public through various council publications at the end of the registration period.

Enclosed is a registration form which you will need to complete fully and return to us as soon as possible.

Please be advised that failure to fully complete and return the enclosed registration form may delay the issuing of a skip license. The London Borough of Barnet may also refuse to issue a license, as it is entitled to do, if it has reasonable grounds for believing that the person applying for the license is not a 'fit and proper person', within the meaning provided for under section 74 of the Environmental Protection Act 1990. It is also an offence under section 139 of the Highways Act 1980, to deposit a skip on the public highway without a license.

If you have any questions please do not hesitate to contact the above telephone number.

Yours Faithfully,

Rita Zippo

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APPROVED SKIP CONTRACTOR SCHEME

Please Note:

- Registration forms must be completed in full
- Incomplete forms will be returned and not added to the approved contractor list
- If the application is made by a Limited Company, the Company Secretary or Director(s) of the Company **must complete this form**

COMPANY DETAILS

Company Name		Other Trading Name(s)	
Company Number		Telephone Number	
		Fax Number	
E-mail Address		VAT Number	

Business Address		Telephone	
		Fax Number	
		E-mail Address	

Operating Centre		Telephone Number	
		Fax Number	
		E-mail Address	

CONTACT DETAILS

Company Director(S) Names		Telephone Number	
Transport Manager Name		Telephone Number	
Other Contact (e.g. administrator)		Telephone Number	
Other Fax Number (e.g. administrator)		Other E-mail address (e.g. administrator)	

LICENCE / POLICY NUMBERS

please ensure a photo copy of all of the following documents are submitted with this form

Goods Vehicle Operators Licence Number		Copy Enclosed?	
Waste Carrier Registration Number		Copy Enclosed?	
Waste Management Licence Number		Copy Enclosed?	
Employer/ Employee Liability Insurance Number		Copy Enclosed?	
Public Liability Insurance Number		Copy Enclosed?	
Sample (blank) Waste Transfer Note		Copy Enclosed?	

Signed _____

Full Name _____

Position _____

Date _____

