Skip Company Central Register Application Form



Highways & Engineering Division 3rd Floor, Paderborn House Le Mans Crescent Bolton BL1 1UA

Email: highwaylicensing@bolton.gov.uk

Company Name:	
Registered Company Operating Address:	
	Destands
County:	Postcode:
Contact Detail (Normal Working Hours)	Contact Details (Outside Normal Working Hours)
Tel Number:	Tel Number:
Fax: Number:	Fax Number:
Email:	Email:
Head Office Details (If Applicable)	
Address:	
County:	. Postcode:
Tel Number:	. Fax No:
Email:	
Please attach a photocopy of your Public Liability Insurance Certificate.	
A minimum of £3 million is required in respect of any one incident to cover liability against all third party risks.	
Name of Insurance Company:	
Policy No:	Renewal Date:

Please attach a photocopy of your waste carriers Licence Certificate	
You are required to have a licence issued under the Control of Pollution (Amendment) Act 1989.	
Registration No:	
Please attach a photocopy of your Goods Vehicle Operator's Licence.	
If you operate any vehicles over 3.5 tonnes gross weight, you are required to have a Goods Vehicle Operator's Licence	
Operator's Licence No:	
I have read and agree to comply with the conditions specified within the "Code of Practice for the Placing of Skips on the Highway" (4 th Edition).	
Signed: Print Name:	
Title:	
Date:	

Please return completed form with the required attachments to:

Streetworks
Highway & Engineering Division
3rd Floor Paderborn House
Howell Croft North
Bolton BL1 1UA

*Please use photocopies of this form if there is more than one address.