

# Skip Company Central Register Application Form



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

Tel: 01204 336677  
Email: highwaylicensing@bolton.gov.uk

Company Name: .....

Registered Company Operating Address:  
.....  
.....

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<sup>th</sup> 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.