

**Waste Management Licensing (Scotland) Regulations 2011**

**("the Regulations")**

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| **Paragraph 50 – Form to register or renew an exemption****(Land treatment with pig or poultry carcass ash for benefit to agriculture or ecological improvement)** |

**PLEASE RETURN THIS FORM TO YOUR NEAREST SEPA OFFICE (see list at end of form)**

Please consult the legislation for details of the exemption and your obligations. Other forms to give notice of separate exemptions under different paragraphs may be obtained from our website [www.sepa.org.uk](http://www.sepa.org.uk) or from your nearest SEPA office.

This notice **must** be received by SEPA at least 21 days before the activity is due to begin. A separate form must be filled out for each activity. SEPA will either:

1. enter the particulars of the exempt activity on the register and confirm this in writing to you before the expiry of the 21 day period; OR
2. serve on you a notice of refusal stating that registration is refused and giving reasons for that decision before the expiry of the 21 day period.

**The Data Protection Act 1998**

“The Scottish Environment Protection Agency is responsible for maintaining and improving the environment and regulating environmental emissions. It has a duty to discharge its functions to protect and enhance the environment and to promote conservation and recreation.

The information provided will be processed by the Scottish Environment Protection Agency to deal with your registration, to monitor compliance with the legislation, to process renewals, and for maintaining the relevant public register(s).

We may also process and/or disclose it in connection with the following:

* offering/providing you with our literature/services relating to environmental affairs
* consulting with the public, public bodies and other organisations (eg Health and Safety Executive, Local Authorities, Emergency Services, Scottish Executive) on environmental issues
* carrying out statistical analysis, research and development on environmental issues
* providing public register information to enquirers
* investigating possible breaches of environmental law and taking any resulting action
* preventing breaches of environmental law
* assessing customer service satisfaction and improving our service.

We may pass it on to our agents/representatives to do these things on our behalf.

**You should ensure that any persons named on this form are informed of the contents of this Data Protection Notice**

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| For Office Use Only |
| Reference No. |  | C & B Team: |  |
| First Notice: | Yes/No | Previous Reference No. |  |
| Date Received: |  | Date of Expiry: |  |
| Date Entered onto Register: |  | Entered within 21 days: | Yes/No |

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| **1. Contact Details of the Establishment or Undertaking i.e. the sole trader, company, partnership, authority, society, trust, club, charity or other organisation that will carry on the exempt activity (Print All)** |
| Name & Designation |  |
| Organisation  |  |
| Address |  |
| Registered Office Address |  |
| Postcode |  | E-mail |  |
| Tel No. |  | Fax No. |  |

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| **2. What are you attempting to register?**  **Tick Appropriate boxes below or give required answer 🡻** |
| (i) Tick each box that applies | The mixing of ash from the incineration of pig or poultry carcasses with manure for the purpose of treatment of land at the place of production. |  |
| The treatment of agricultural land with ash from the incineration of pig or poultry carcasses, or such ash mixed with manure resulting in benefit to agriculture or ecological improvement.  |  |
| (ii) Tick one onlyIf you are renewing a registration complete the relevant section of this form where minor changes exist. Where major changes exist, it should be registered as a new activity. | a) You wish to register the exempt activity for the first time. |  |
| b) You wish to renew a registration for a currently registered activity. |  |
| c) You wish to register an activity that was previously registered but isn’t currently registered. |  |
| If b) give exemption reference number(s) (e.g. WMX/E/12345 or WML/XC/12345); |  |
| if c) give exemption reference number and state reason why it isn’t currently registered. |  |

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| **3. The location of the exempt activity** |
| (i) Address of location of activity |  |
| (ii) Give an 8 figure grid reference of a key point of the treatment area, e.g. NS 7808 9469 |  |
| (iii) Is the activity within a designated area (e.g. SSSI, NVZ etc.)? If yes state designation(s): |  |
| (iv) Please give details of any licences or permits held by the establishment or undertaking named in 1 above relating to the production of the ash at the location named in 3 above, e.g. PPC permit or Waste Management Licence.  |  |

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| **4. The Treatment Activity** |
| (i) What is the treatment frequency? (Select one only) | **Once per annum (tick if relevant)** |  |
| **Other (state frequency if relevant)** |  |
| (ii) Intended start date of treatment(s) |  | (iii) Intended completion date of treatment(s) |  |
| (iv) Give the total area in hectares intended to be treated | Ha | (v) Give the total quantity of waste (ash and manure) to be spread  | Kg or Tonnes(delete as applicable) |
| (vi) State the maximum application of ash per treatment  | Kg/Ha | (viii) State the method of application e.g. deep soil injection |  |
| (vii) State the maximum amount of ash to be used per year**Note: must be** **≤150kg/ha/year** | Kg/Ha |

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| **5. Description of the waste involved in the exempt activity** |
| (i) Waste Type (tick appropriate box) | Pig carcass ash |  | Poultry carcass ash |  | Both types of carcass ash |  |
| Total waste arising per year | kg |

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| (ii) Will the pig or poultry ash be mixed with manure prior to spreading? | Y/N |
| (iii) Please identify any potential risks to the environment associated with the inherent hazards of the waste and any preventative measures that will be put in place to protect the environment. (Additional sheets may be appended if required.) |
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| **6. Description of any waste storage pending the exempt activity** *Note: storage includes anywhere deposited greater than 12 hours prior to use* |

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| (i) Do you intend to store the waste?  | Y/N |
| (ii) Do you intend to store the ash separately from any manure used in subsequent land treatment? | Y/N |
| (iii) Is the storage location the same as the treatment area?  | Y/N |
| (iv) Intended start date of storage |  | (v) Intended completion date of storage |  |
| (vi) Give an 8 figure grid reference of the treatment area, e.g. NS 7808 9469 |  | (vii) Give the total quantity of waste to be stored **Note: Must be ≤ 100 Tonnes**  |  |
| (viii) State the method and type of storage (give capacity) |  |
| (ix) Tick each correct statement in the list below: |
| Storage is further than 10 metres from any inland or coastal water |  |
| Storage is further than 50 metres from any well, borehole or similar work sunk into underground strata for the purpose of use as a non-domestic water supply  |  |
| Storage is further than 250 metres from any well, borehole or similar work sunk into underground strata for the purpose of used as a domestic water supply |  |
| Storage is secure |  |
| (x) Describe what reasonable precautions you will take to ensure that the waste cannot escape from storage and members of the public are unable to gain access to it?  |
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| **7. Land Ownership Details** |
| (i) Tick each correct statement in the list below |
| You are the owner or have control of the land where the activity is to be carried on |  |
| If you are not the owner or have control of the land please state the name and address of the owner of the land in the space below |
|  |
| The activity will be carried out with the consent of the owner of the land  |  |
| If the activity will be carried out without the consent of the owner of the land please state why you are entitled to carry out the activity and detail any consents necessary for you to carry out the activity. |
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| **8. Purpose of the treatment** |
| (i) The purpose of the treatment is for: (Tick the relevant box and complete the corresponding section) |
| **Ecological improvement** (go to section 9 - ignore 10 & 11) |  |
| **Agricultural improvement** (go direct to section 10) |  |

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| **9. Ecological Improvement** |
| (i) You must include a document describing how the treatment will result in ecological improvement. This should identify individual species or habitat type and discuss how they will benefit from the treatment. Please note: failure to provide sufficient evidence to back the claim of ecological improvement will result in your notification being refused. The statement shall be prepared by or based on advice from a person with appropriate technical or professional expertise. The document should state this experience and be signed and dated by that person. Tick box if included. |  |
| (ii) You must also include a document giving an assessment of the risk of pollution posed by the treatment and any preventative measures proposed. Tick box if included.  |  |

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| **10. Agricultural Benefit** |
| (i) Tick each correct statement in the list below: |
| The waste will increase crop yield/quality |  |
| The waste will improve the chemical properties of the soil (e.g. pH) |  |
| The waste will improve the physical properties of the soil (e.g. tilth) |  |
| The waste will improve the biological properties of the soil |  |
| The waste will improve any soil moisture deficit |  |
| The waste will have other benefits |  |
| (ii) You must include a document describing how the treatment will result in agricultural benefit. For each of the stated aims (10(i) above) you ticked, explain using the results of chemical analysis how the application of the specified waste will deliver agricultural benefit. You should detail optimum crop requirements, what the waste supplies and also when the crop requires the benefit associated with the waste. Please note: failure to provide sufficient evidence to back the claim of agricultural benefit will result in your notification being refused. The statement shall be prepared by or based on advice from a person with appropriate technical or professional expertise. The document should state this experience and be signed and dated by that person. Tick box if included. |  |
| (iii) You must also include a document giving an assessment of the risk of pollution posed by the treatment and any preventative measures proposed. Tick box if included.  |  |

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| **11. Individual Field Assessment - A copy of this page should be completed for each field.**  |
| Field Number/Identifier & size (Hectares - Ha) (as per your submitted map)(this number/identifier should also be on associated soil analysis) |  | Ha |
| (i) Current crop/use |  |
| (ii) Planned crop/use |  |
| (iii) Identify any wastes, including agricultural (eg manure or slurry), previously used to treat the land in the 6 months prior to the date of the intended treatment (include type of waste, approximate quantity, method of application) |
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| (iv) Tick the relevant boxes  |
| Will the waste be spread in accordance with the PEPFAA\* code*\*Prevention of Environmental Pollution from Agricultural Activity* | Y/N |
|  | Please circle most appropriate |
| Maximum field slope (any part of field) | <5o | 5-10o | >15o |
| Proximity to watercourse/ditches (nearest part of field) |  | <15m | >15m |
| Proximity to spring, well or borehole (nearest part of field) |  | <50m | >50m |
| Proximity to drinking water supply (nearest part of field) |  | <250m | >250m |
| Proximity to dwelling (nearest part of field) |  | <50m | >50m |
| Average depth to water table | >1m | 0.5-1m | <0.5m |
| Are buffer strips to be established in this field? *(mark on associated plan)* | Y/N |
| Have field drains been installed within the last year? | Y/N |
| Give the principal soil type of the field |  |
| **OFFICE USE ONLY - FIELD ACCEPTABLE** | **Yes / No** |

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| **12. This notice shall be accompanied by the following documents**Please tick all boxes where the relevant documents have been included. |
| **For Initial registration - the following additional documents are required** |
| (a) A plan of each place at which the exempt activity will be carried on showing the boundary of that place and the locations within that place at which the exempt activity is to be carried on and where storage will take place. You are required to mark on the location of any part of the water environment within 15m of the land on which the waste is to be used and to aid assessment it would be beneficial if you could mark on all buffer strips where appropriate. |  |
| (b) A certificate of ecological improvement; or a certificate of agricultural benefit (as described above) |  |
| (c) An assessment of the risk of pollution posed by the treatment |  |
| (d) Chemical analysis of the wastes to be used and the soil which is to be treated |  |
| (e) The prescribed charge (cheques made payable to “Scottish Environment Protection Agency”) The current charges can be obtained on the SEPA website [www.sepa.org.uk](http://www.sepa.org.uk) at <http://www.sepa.org.uk/charging/fees_charges/index.htm> or from your local SEPA office. |  |
| **For registration renewal - the following additional documents are required** |
| (a) A certificate of ecological improvement or agricultural benefit as described above - this should detail why the treatment is still required |  |
| (b) Chemical analysis of the wastes to be used and the soil which is to be treated |  |
| (c) The prescribed charge (cheques made payable to “Scottish Environment Protection Agency”) The current charges can be obtained on the SEPA website [www.sepa.org.uk](http://www.sepa.org.uk) at <http://www.sepa.org.uk/charging/fees_charges/index.htm> or from your local SEPA office. |  |

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| **13. Declaration** |
| Important Please Note: It is an offence for a person to make a statement which he/she knows to be false or misleading in a material particular, or to recklessly make a statement which is false or misleading in a material particular. |
| **Declaration of Notice / Renewal of Notice****(The declaration must be signed by applicants or their agents)** |
| I/we certify that, to the best of my/our knowledge, the information provided in this form and any associated documents are correct.  |
| Signature |  | Date |  |
| Name (PRINTED) |  | Company Name |  |

**Please return this form to your nearest SEPA Office:**

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| **Aberdeen Office**Inverdee HouseBaxter Street, TorryABERDEEN, AB11 9QATel: 01224 266600Fax: 01224 896657 | **Angus Smith Building**6 Parklands AvenueEurocentralHolytown,North LanarkshireML1 4WQ Tel: 01698 839000Fax: 01698 738155 | **Dingwall Office**Graesser HouseFodderty WayDingwall Business ParkDINGWALL, IV15 9XBTel: 01349 862021Fax: 01349 863987 |