****

**Environmental Authorisations (Scotland) Regulations 2018**

**PERMIT MODULAR APPLICATION FORM**

**SECTION 6 - TRANSFER OF RADIOACTIVE WASTE TO ANOTHER PERSON**

|  |
| --- |
| **6a Please indicate by which route you intend to transfer radioactive waste to another person** *(see guidance note on p23)* |
| **To a person outwith the UK not requiring a Transfrontier Shipment of Radioactive Waste and Spent Fuel Authorisation** – complete all questions below |[ ]
| **To another person -** complete all questions below **and give details:** |[ ]

Note: Disposal of radioactive waste with normal refuse, to a Waste Permitted Person within the UK and to persons outside of the UK in accordance with TFS is included as standard in all permits and does not need to be applied for; however, you must notify SEPA 28 days in advance of first use of the route in accordance with the permit condition.

|  |
| --- |
| **6b Please provide the information requested in the table below***(see guidance note on p23 & use the key indicators specified below the table)* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Physical form of the waste** | **Radionuclide or group of radionuclides** | **Mass (kg) or Volume (m3) of waste** | **Max. activity of each radionuclide (Bq)** | **Max. concentration of radionuclide (Bq/g)** | **Type of change requested** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. |

**Key: (N) = new request, (I) = increase requested, (R) = reduction requested, (U) = unchanged**

|  |
| --- |
| **6c. What are the contact details and address of the person who will receive the waste?** *(see guidance note on p24) If more than 1 person, please provide details on a separate sheet.* |
| **Official Name of Person:** | Click or tap here to enter text. |
| **Official Address:** | Click or tap here to enter text. |
| **Company Registration Number (if applicable):** | Click or tap here to enter text. |
| **Site Name & Address****(if different to above):** | Click or tap here to enter text. |
| **Country:** | Click or tap here to enter text. |
| **Telephone No:** | Click or tap here to enter text. |
| **Email:** | Click or tap here to enter text. |
| **Site Permit number****(if applicable):** | Click or tap here to enter text. |
| **Regulator:** | Click or tap here to enter text. |

|  |
| --- |
| **6d. Please give details of any significant non-radioactive properties of the radioactive waste and confirmation that the chosen route is suitable for its non-radioactive properties.***(see guidance note on p25)* |
| Click here to enter text. |

|  |
| --- |
| **6e. Please describe how this transfer represents Best Practicable Means (BPM)?** *(see guidance note on p25)* |
| Click here to enter text. |

|  |
| --- |
| **6f. Have you included documentation confirming that the person you intend to use is willing, in principle, to accept the waste?** *(see guidance note on p26)* |
| **Yes** [ ]  **No** [ ] **If NO, please explain below:**Click here to enter text. |

|  |
| --- |
| **6g. Please describe contingency arrangements if your planned transfer route(s) become unavailable.** *(see guidance note on p26)* |
| Click here to enter text. |