

Marine Licence Application for Discharge of Treatment Agents from a Wellboat

Version 1.0

Marine (Scotland) Act 2010

It is the responsibility of the applicant to obtain any other consents or authorisations that may be required.

Under Section 54 of the Marine (Scotland) Act 2010, all information contained within and provided in support of this application will be placed on a Public Register. There are no national security grounds for application information not going on the Register under the 2010 Act

Public Register

Do you consider that any of the information contained within or provided in support of this application should not be disclosed:

(a) for reasons of national security; YES NO

(b) for reasons of confidentiality of commercial or industrial information where such confidentiality is provided by law to protect a legitimate commercial interest? YES NO

If **YES**, to either (a) or (b), please provide full justification as to why all or part of the information you have provided should be withheld.

WARNING

It is an offence under the Act under which this application is made to fail to disclose information or to provide false or misleading information.

Target duration for determination is 14 weeks. Please note that missing or erroneous information in your application and complications resulting from consultation may result in the application being refused or delayed.

Marine licence applications will not be accepted unless accompanied by a cheque for the correct application fee, or if an invoice is requested, until that invoice is settled. Target timelines for determining applications do not begin until the application fee is paid.

Declaration

I declare to the best of my knowledge and belief that the information given in this form and related papers is true.

Signature **Redacted**

Date

Name in BLOCK LETTERS **Redacted**

Application Check List

Please check that you provide all relevant information in support of your application, including but not limited to the following:

- Completed and signed application form
- Maps/Charts
- Co-ordinates of the boundary points of the area of harbour jurisdiction (if you are a statutory harbour authority)
- BPEO Assessment
- Material Data Sheets for all treatment agents applied for
- A copy of the CAR licence issued from SEPA
- Standard Operating Procedure providing details of the proposed procedure for discharge of all treatment agents applied for
- Additional information e.g. consultation correspondence (if applicable)
- Payment (if paying by cheque)

1. Applicant Details

Title: Initials: Surname:

Trading Title (if appropriate):

Address:

Name of contact (if different):

Telephone No. (inc. dialing code):

Email:

Statutory Harbour Authority? YES NO

If **YES**, please provide a list of the latitude and longitude co-ordinates (WGS84) of the boundary points of the area of harbour jurisdiction using Appendix 01 Additional Co-ordinates form if necessary.

2. Agent Details (if any)

Redacted **Redacted** **Redacted**
Title Initials: urname:

Trading Title (if appropriate):

Address:

Name of contact (if different):

Telephone No. (inc. dialing code): **Redacted**

Email **Redacted**

3. Payment

Enclosed Cheque Invoice

Contact and address to send invoice to:

Applicant Agent Other

If **OTHER**, please provide contact details:

Title: Initials: Surname:

Address:

Email:

4. Application Type

Is this application for a new wellboat discharge site or an existing wellboat discharge site:

New Site Existing Site

If an **EXISTING SITE**, please provide the consent/licence number and expiry date:

Consent/Licence Number	Expiry Date

5. Marine Farm

Do you have a consent/licence for the marine farm where proposed treatment agent discharge is to take place?

YES NO

If **YES**, please provide the consent/licence number and expiry date:

Consent/Licence Number	Expiry Date

6. Wellboat Discharge Details

(a) Brief description of the discharge including rationale for discharge:

(b) Proposed start date (**Target duration for determination of a marine licence application is 14 weeks**):

(c) Proposed completion date:

(d) Location:

Latitude and Longitude co-ordinates (WGS84) defining the proposed discharge point (continue on Appendix 01 Additional Co-ordinates form if necessary):

Latitude								Longitude							
		°			.		' N			°			.		' W
		°			.		' N			°			.		' W
		°			.		' N			°			.		' W
		°			.		' N			°			.		' W

(e) Water depth and distance from land:

Water Depth (metres)	Distance from Land (metres/kilometres)

(f) Is the discharge site located within the jurisdiction of a statutory harbour authority?

YES NO

If **YES**, please specify statutory harbour authority:

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(g) Potential impacts the works may have (including details of areas of concern e.g. designated conservation and shellfish harvesting areas) and proposed mitigation in response to potential impacts (continue on separate sheet if necessary):

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7. **Details of Treatment Agent(s) to be Discharged** (Please provide Material Safety Data Sheets for each chemical to be discharged).

Proprietary Name of Treatment Agent(s)	Chemical Name of Treatment Agent(s)

8. **Details of Discharge** (Please provide details for each of the deposits listed in Section 7 above):

Deposit	Date of Discharge (approx.)	Duration of Discharge (minutes)	Weight/Volume of Agent (grams/cubic metres)	Total Volume (including solvent) (cubic metres)
1				
2				
3				
4				
5				

9. **Details of Discharge Procedure** (Please provide details for each of the deposits listed in Section 7 above):

Deposit	Method of Deposit	Mode of Deposit	Depth of Deposit (metres)	Rate of Deposit (litres or cubic metres per second/minute/hour)
1				
2				
3				
4				
5				

10. **Details of Vessel(s) Undertaking Discharge** (continue on a separate sheet if necessary):

Vessel Name	Registration Details/Call Sign (if appropriate)	Name and Address of Operator

11. Scotland’s National Marine Plan

Have you considered the application with reference to Scotland’s National Marine Plan? YES NO

If **YES**, provide details of considerations made including reference to the policies that have been considered:

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If **NO**, please provide an explanation of why you haven't considered the National Marine Plan?

12. Consultation

List all bodies you have consulted and provide copies of correspondence:

13. Associated Works

Provide details of other related marine projects, including reference/licence numbers (if applicable):