

**APP-GEN1**

**The Environmental Authorisations (Scotland) Regulations 2018 (EASR)**

**Application form for a:**

* **New authorisation**
* **Variation of an authorisation**

Version 1.0, June 2025

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SEPA handles personal information in accordance with the Data Protection Act 2018. For more information on how we handle your personal information, and commercial confidentiality please read our [Privacy Policy](https://beta.sepa.scot/about-sepa/how-we-work/privacy-notice/).

If you would like this document in an accessible format, such as large print, audio recording or braille, please contact SEPA by emailing equalities@sepa.org.uk.

## How to use this APP-GEN1 form

Use this form to apply for:

* A new authorisation (registration or permit) under the Environmental Authorisations (Scotland) Regulations 2018 (“EASR”).
* A variation of an existing authorisation (registration or permit) under EASR.

You will need to submit additional form(s) along with this APP-GEN1 form to complete your application.

## Before you apply

* Where you see the term ‘document reference’, enter the document reference(s) for the information you have provided. These must be submitted along with the completed form.
* Complete the relevant forms and submit all the required information. If you fail to do so, we will return your application and may retain part of the fee.

## How to apply

From 1 November 2025, the quickest and easiest way to apply is via our digital application service on our website.

If you cannot apply using our digital application service, you can complete and submit an application via email or by post.

Email address: **registry@sepa.org.uk**

Postal address: **SEPA**

**Angus Smith Building**

**Unit 6, 4 Parklands Avenue, Holytown, Motherwell**

**ML1 4WQ**

If you are submitting your application by email or by post:

* **For a new permit**, **new registration, or variation of a registration,** your application must include:
1. A completed APP-GEN1 form
2. Completed activity form(s)
3. Any required supporting information
* **For a variation of a permit**, your application must include:
1. A completed APP-GEN1 form
2. Completed Variation form(s)
3. Completed activity form(s) if required
4. Any required supporting information

You can download activity forms and variation forms on our website.

## Section 1 - Contact details

Please provide the contact details of the person we should contact with any questions regarding this application. This may be the applicant or another person with the relevant authority to complete the application on behalf of the applicant (e.g. a director, environmental manager, agent, consultant).

**Table 1: Contact details**

| **Question** | **Answer** |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Business name** |  |
| **Phone number** |  |
| **Email address** |  |

## Section 2 - Application type

Please select only one of the boxes below to confirm the type of application you wish to submit.

**Important**: You must submit additional form(s) (activity form(s) and/or variation form(s)) along with this APP-GEN 1 form to complete your application.

**New authorisation** [ ]

**Variation of an existing authorisation** [ ]

If you are applying for a variation of an existing authorisation, please provide the authorisation reference.

| **Authorisation reference** (e.g. EAS/R/1234) |
| --- |
|  |

## Section 3 - About the applicant

The applicant must be the person who has or will have control over the regulated activity. This means they must have the authority and ability to ensure compliance with the conditions of the authorisation.

* For new authorisation, if the application is granted, the applicant will be referred to as the “authorised person”.
* For a variation of an existing authorisation, the applicant must be the existing authorised person.

Please read our guidance on Who can hold an authorisation to understand our criteria for assessing if you are ‘in control’ of the regulated activity and if you are a ‘fit and proper person’ to hold or continue to hold an authorisation.

#### One person in control

For applications where **one person** has or will have control of the regulated activity, please complete only one of the Sections 3.1 to 3.6 below that is relevant to you.

#### Multiple persons in control

For applications where **multiple persons** have or will have control of the regulated activity, contact us to discuss the application process before completing this form.

Supporting information for an application where multiple persons have or will have control of the regulated activities must:

* Detail which person has responsibility for which part of the proposed authorised place.
* Specify which activity each person controls; and
* Identify how the different persons in control will liaise to ensure compliance with the conditions of the authorisation.

### 3.1 Individual

**Table 2: Individual details**

| **Question** | **Answer** |
| --- | --- |
| **Name** |  |
| **Trading name** (if applicable) |  |
| **Business address** |  |
| **Phone number** |  |
| **Email address** |  |

Please provide the relevant details for the individual named above in Annex 1.

### 3.2 Registered company

**Table 3: Registered company details**

| **Question** | **Answer** |
| --- | --- |
| **Company name** |  |
| **Trading name** (if applicable) |  |
| **Registered number** **with Companies House** |  |
| **Registered office address** |  |
| **Postcode** |  |
| **Main office address and** **postcode** (if different) |  |
| **Contact name** |  |
| **Position** |  |
| **Phone number** |  |
| **Email address** |  |

Please provide the relevant details for the following additional persons in Annex 1:

* all current directors; and
* company secretaries.

### 3.3 Partnership

**Table 4: Partnership details**

| **Question** | **Answer** |
| --- | --- |
| **Partnership name** |  |
| **Trading name** (if applicable) |  |
| **Registered/Principal business address** |  |
| **Postcode** |  |
| **Registered number with Companies House** (if applicable) |  |
| **Main office address and** **postcode** (if different) |  |
| **Contact name** |  |
| **Position** |  |
| **Phone number** |  |
| **Email address** |  |

Please provide a copy of the Deed of Partnership or, if no deed exists, other evidence that the partnership exists (e.g. confirmation from your accountants or bankers that a partnership exists). This is not required for a Limited Partnership or a Limited Liability Partnership.

| **Document Reference** |
| --- |
|  |

For all partnerships, please provide the relevant details for the following additional persons in Annex 1:

* all current partners or members.

### 3.4 Statutory corporations and public bodies/bodies corporate

**Table 5: Statutory corporations and public bodies/bodies corporate details**

| **Question** | **Answer** |
| --- | --- |
| **Public body/Corporation name** |  |
| **Registered/Principal office address** |  |
| **Postcode** |  |
| **Incorporation date**  |  |
| **Details of how incorporated** (e.g. statue/Royal Charter) |  |
| **Contact name** |  |
| **Position** |  |
| **Phone number** |  |
| **Email address** |  |

### 3.5 Incorporated association/organisation

**Table 6:** **Incorporated association/organisations detail**

| **Question** | **Answer** |
| --- | --- |
| **Association/Organisation name**(e.g. Scottish Charitable Incorporated Organisations) |  |
| **Address/Registered office address** |  |
| **Postcode** |  |
| **Incorporation number**  |  |
| **Contact name** |  |
| **Position** |  |
| **Phone number** |  |
| **Email address** |  |

Please provide the relevant details for the following additional persons in Annex 1:

* all trustees.

### 3.6 Unincorporated association/Trust

**Table 7: Unincorporated association/Trust details**

| **Question** | **Answer** |
| --- | --- |
| **Association/Trust name** |  |
| **Address**  |  |
| **Postcode** |  |
| **Date of formation**  |  |
| **Contact name** |  |
| **Position** |  |
| **Phone number** |  |
| **Email address** |  |

Please provide a copy of your constitution or trust deed, if you have one.

| **Document Reference** |
| --- |
|  |

SEPA may request additional evidence to be satisfied that the association can be the authorised person.

Please provide the relevant details for the following additional persons in Annex 1:

* all current officer bearers of the association; or
* all trustees if the association is a Trust.

## Section 4 - In control and Fit and Proper Person

For applications to carry out a new regulated activity, or to vary an existing authorisation, we must be satisfied that the applicant is the person who has, or will have, control over the regulated activity and is a fit and proper person to be in control of the regulated activity.

Please read our guidance on Who can hold an authorisation to understand our criteria for assessing if you are ‘in control’ of the regulated activity and if you are a ‘fit and proper person’ to hold or continue to hold an authorisation.

### 4.1 In control

Please tick the box below to confirm the following statement.

If you are not the applicant (the proposed or current authorised person), you must have the authority to provide this confirmation on their behalf.

I confirm that the applicant (the proposed or current authorised person) [ ]  has or will have control over the regulated activity.

4.2 Monetary penalty notices

#### Has the applicant or any person listed in Annex 1 (as required in Section 3 of this form) been served with a Fixed Monetary Penalty notice and/or a Variable Monetary Penalty notice by SEPA under the Environmental Regulation (Enforcement Measures) (Scotland) Order 2015?

Yes [ ]

No [ ]

If ‘Yes’, please provide further details in Annex 2.

4.3 Convictions for relevant offences

Has the applicant or any person listed in Annex 1 (as required in Section 3 of this form) been convicted of any relevant offence?

The list of relevant offences is available on our website. You do not need to tell us about any spent convictions.

Yes [ ]

No [ ]

If ‘Yes’, please provide further details in Annex 3.

## Section 5 - About your pre-application discussions

If you have had any pre-application discussions with us before submitting your application, please provide the SEPA team name involved.

| **SEPA Team Name** |
| --- |
|  |

## Section 6 - National security, commercial confidentiality and other sensitive information

If you are providing information that is commercially confidential or related to national security or other sensitive information, please notify us in this section.

### 6.1 National security

Is there any information in this application that you believe should be kept from the Public Register on the grounds of national security?

Yes [ ]

No [ ]

If ‘Yes’, please:

* provide a copy of the application to the Secretary of State or the Scottish Ministers for a direction (as appropriate) on the issue of national security;
* submit a separate document clearly marked as "National Security" including full details and justification, along with a copy of any direction from the Secretary of State or the Scottish Ministers.
* do not include any national security information or give reference numbers to the relevant documents submitted in or with this form.

### 6.2 Commercial confidentiality

#### Is there any information in your application that you believe should be kept from the public register on the grounds of commercial confidentiality?

Yes [ ]

No [ ]

If ‘Yes’, please provide full details and reasons why you consider the information to be commercially confidential on a separate document. SEPA will consider whether any such claim is justified.

| **Document Reference** |
| --- |
|  |

### 6.3 Other sensitive information

Is there any information in your application that you believe should be kept from the public register due to its sensitivity (e.g. the location of species requiring special protection)?

Yes [ ]

No [ ]

If ‘Yes’, please provide full details and justification on a separate document. SEPA will consider whether any such claim is justified.

| **Document Reference** |
| --- |
|  |

## Section 7 - Charging

### 7.1 Application fee charges

To complete your application, you must include the correct fee with this form.

Use the table below to list the details of each regulated activity and its corresponding fee. If necessary, you can add more entries. You can find activity descriptions and application fees on the relevant activity webpage or on the [Charging Scheme page](https://www.sepa.org.uk/regulations/authorisations-and-permits/charging-schemes/charging-schemes-and-summary-charging-booklets/) of our website.

If you need assistance determining the correct application fee, contact charging@sepa.org.uk.

**Table 8: Activity details and application charges**

| **SEPA Reference Number** | **Description of the regulated activity:**  | **Application charge (£)** |
| --- | --- | --- |
|  |  | £ |
|  |  | £ |
|  |  | £ |
|  |  | £ |
|  |  | £ |
|  |  | £ |
|  |  | £ |

**TOTAL:**

### 7.2 Payment method

Please confirm your payment method below:

**Online payments** [ ]

You can access our [online payments system](https://beta.sepa.scot/about-sepa/online-payments/) on our website.

**BACS** [ ]

For BACS payments, please use the following details:

Sort code: **83 34 00**

Account number: **00137187**

Account name: **SEPA**

We cannot process your application until proof of payment is received. Please submit proof of payment in a separate document.

| **Document Reference** |
| --- |
|  |

### 7.3 Contact details for invoices

Some regulated activities may also have an associated annual subsistence charge.

If this applies to your activity and the contact details for invoices are different from those provided in Section 3, please provide the details of the person or department we should contact about charges and the address where all invoices should be sent to.

**Table 9: Contact details for invoices**

| **Question** | **Answer** |
| --- | --- |
| **Name/Department name** |  |
| **Business address** |  |
| **Postcode** |  |
| **Phone number** |  |
| **Email address** |  |

## Section 8 - Declaration

By submitting the application (APP-GEN1 form, relevant activity form(s) and/or variation form(s), and any supporting information) you are confirming all of the following:

1. (a) I am the applicant, and I apply for the type of application specified in Section 2 of this form under the Environmental Authorisations (Scotland) Regulations 2018 and have completed all particulars of the application; or

(b) I am authorised on behalf of the applicant to apply for the type of application specified in Section 2 of this form under the Environmental Authorisations (Scotland) Regulations 2018 and to complete all particulars of the application.

1. The information is correct (Note: knowingly or recklessly submitting false or misleading information may be an offence).
2. Any person whose personal information is included in or with this application has been made aware of how we use personal information under Data Protection Act 2018 (‘DPA 2018’) and [SEPA’s General Privacy Policy](https://beta.sepa.scot/about-sepa/how-we-work/privacy-notice/).

**Table 10: Details of the person submitting the application and making the declaration**

| **Question** | **Answer** |
| --- | --- |
| **Name of person submitting the application** (e.g. individual applicant, director name, partner name, consultant name, environmental manager name) |  |
| **Position or capacity of the person named above**(e.g. you are the applicant, director of the applicant, consultant to the applicant) |  |
| **Email address and phone number** (if not already provided in this form) |  |
| **Date** |  |

## Annex 1 – Applicant and additional persons details

Please provide the required details in the tables below, as relevant to your application.

1. If the applicant is an individual (Section 3.1 of this form applies), provide their details in Part A of this annex.
2. If the applicant falls under Sections 3.2 to 3.6 of this form, provide details for each additional person specified in the relevant section:
* If the additional person is an individual (e.g. director, company secretary partner, trustee), complete their details in Part A of this annex.
* If the additional person is not an individual (e.g. a registered company, a partnership), complete their details in Part B of this annex.

Add more entries as needed.

#### Part A - Individuals (e.g. individual applicant, director, partner, member, trustees)

**Table 11(a): Individual 1 details**

| **Question** | **Answer** |
| --- | --- |
| **Name**  |  |
| **Position** (e.g. director, partner) |  |
| **Date of birth** |  |
| **Home address**  |  |
| **Postcode** |  |

**Table 11(b): Individual 2 details**

| **Question** | **Answer** |
| --- | --- |
| **Name**  |  |
| **Position** (e.g. director, partner) |  |
| **Date of birth** |  |
| **Home address**  |  |
| **Postcode** |  |

**Part B – Non-Individuals (e.g. registered company, partnership)**

**Table 12(a): Non-Individual 1 details**

| **Question** | **Answer** |
| --- | --- |
| **Name of Corporate Body or Partnership** |  |
| **Registered/Principal address** |  |
| **Registered number with Companies House** (if applicable) |  |

**Table 12(b): Non-Individual 2 details**

| **Question** | **Answer** |
| --- | --- |
| **Name of Corporate Body or Partnership** |  |
| **Registered/Principal address** |  |
| **Registered number with Companies House** (if applicable) |  |

## Annex 2 – Monetary penalty notices details

If the applicant or any additional persons listed in Annex 1(as required in Section 3 of this form) have been served with a Fixed and/or Variable Monetary Penalty Notice by SEPAunder the Environmental Regulation (Enforcement Measures) (Scotland) Order 2015, please complete the table below.

Include the penalty reference number, name and date of birth of the person who received the penalty, their position at the time (if an individual), the date the penalty was issued, and, if applicable, the status of any appeal and timeframe for conclusion.

Information on penalties imposed is available on the Enforcement page of our website.

You should also provide information in relation to any monetary penalties that you would like SEPA to take into consideration when determining whether the applicant is a fit and proper person to be in control of the activity.

Add more entries, as needed.

**Table 13(a): Monetary penalty details**

| **Question** | **Answer** |
| --- | --- |
| **Penalty reference number** (if known) |  |
| **Name of person who received the penalty**  |  |
| **Date of birth of the person who received the penalty** (if an individual) |  |
| **Position held when the penalty was issued** (if an individual) |  |
| **Date the penalty was issued** |  |
| **If the penalty is under appeal, please provide the appeal status and timeframe for conclusion** (if known) |  |

|  |
| --- |
| **Provide below information in relation to any monetary penalties that you would like SEPA to take into consideration when determining whether the applicant is a fit and proper person to be in control of the activity** |
|  |

## Annex 3 – Conviction for relevant offences details

If the applicant or any additional persons listed in Annex 1(as required in Section 3 of this form) have been convicted of any relevant offence, please complete the table below with the required details. This should include the name and date of birth of the person convicted, the offence they were convicted of, the date of the conviction, name of the court, and, if applicable, the status of any appeal and timeframe for conclusion.

The list of relevant offences is available on our website on the Who can hold an authorisation web page.

You should also provide information in relation to any convictions that you would like SEPA to take into consideration when determining whether the applicant is a fit and proper person to be in control of the activity.

Add more entries, as needed.

**Table 14(a): Conviction for relevant offence details**

| **Question** | **Answer** |
| --- | --- |
| **Name of the person convicted** |  |
| **Date of birth of the person convicted** (if an individual) |  |
| **Position held at the time of the offence** (if an individual) |  |
| **Name of the court where the case was dealt with** |  |
| **Offence convicted of** |  |
| **Date of conviction**  |  |
| **If the conviction is under appeal, please provide the appeal status and timeframe for conclusion** (if known) |  |

|  |
| --- |
| **Provide below information in relation to any convictions that you would like SEPA to take into consideration when determining whether the applicant is a fit and proper person to be in control of the activity** |
|  |