

Liquefied Petroleum Gas Market Regulations – S.L. 545.20

APPLICATION FOR THE GRANTING, RENEWAL OR TRANSFER OF AN AUTHORISATION TO RETAIL PORTABLE CYLINDERS FILLED WITH LPG FROM A FIXED POINT OF SALE (FORM A)

1.0 Application Type

Please tick “✓” against the appropriate box:

☐ Granting

☐ Renewal

☐ Transfer

2.0 Details of the Applicant

Please insert your personal details if applying as an individual. If the application is being submitted on behalf of a Company or a Legal Organisation, the details of the Legal Representative shall be inserted instead.

Full Name of Individual or Legal Representative:

Contact Address:

I.D. / Passport No.:

Tel. No. (Fixed Line):

Tel. No. (Mobile):

Email:

Name of Company / Legal Organisation (if applicable):

Company (or equivalent) Reg. No. (if applicable):

3.0 Details of current Authorised Provider (transferor)

Section to be filled-in in the case of a TRANSFER application ONLY. In the case the current authorised provider is a Company or a Legal Organisation the details of the Legal Representative shall be filled in. Leave blank if n/a.

REWS Authorisation No.:

Contact Address:

Full Name of Individual or Legal Representative:

I.D. / Passport No.:

Tel. No. (Fixed Line):

Tel. No. (Mobile):

Name of Company / Legal Organisation (if applicable):

Email:

Company (or equivalent) Reg. No. (if applicable):

Declaration of current authorised provider:

I, the above undersigned provider declare that I give my unconditional consent to the transfer of the above-mentioned REWS authorisation to the third party as indicated in section 2.0 above. I understand that this eventual transfer (if any) does not exonerate me from fulfilling any obligations arising from any authorisation or any applicable law including the payment of any amount due to the Regulator.

Signature of current authorised provider

_____/_____/_____
Date

4.0 Operational Details

4.1. *Please fill in details of the Fixed Point of Sale used to retail portable LPG cylinders. Insert n/a if Not Applicable.
(Please attach a separate sheet to the application form if necessary)*

[illegible]

¹ This is the total mass of LPG stored in portable cylinders at each Fixed Point of Sale Site/s.

5.0 Documentation

Please submit the following documentation:

- 5.1. ☐ A copy of the identity card or passport of the applicant or the Legal Representative in the case of a company / Legal Organisation.
- 5.2. ☐ A recent (< 3 months old) police conduct certificate of the applicant. In the case of a company/ Legal Organisation, the police conduct certificate of the Legal Representative.
- 5.3. ☐ A business plan to include at least the following:
- Shareholding and sources of finance.
 - Logistics for example on the storage, distribution and sale, where applicable.
 - Market analysis or business strategy
 - Annual audited financial statements covering the most recent 3 years of operations where applicable (for the most recent year, abridged statements are acceptable)
- OR
- ☐ Financial forecasts for each of the first 3 years from the granting of the Authorisation and which include a balance sheet, profit and loss accounts and cash flow statements.

At the Design Stage :

- 5.4. ☐ Technical Proposal compiled by the Competent Person indicating the proposed design details of the Fixed Point of Sale site/s indicated in 4.1 above. (To include drawings of site in scale 1:100 and a site plan in scale 1:2500)

Upon Completion of the Fixed Point of Sale:

- 5.5. ☐ PA Approved Permit of the development covering the Fixed Point of Sale site/ s indicated in 4.1 above.
- 5.6. ☐ Commissioning Report by the Competent Person of the Fixed Point of Sale site/ s indicated in 4.1 above.
- 5.7. ☐ A copy of the Insurance Schedule and its respective Insurance Policy details indicating the liability coverage to third parties against bodily injury and property damage caused by the storage of LPG and the associated operations of the Fixed Point of Sale site/ s indicated in 4.1 above.
- 5.8. ☐ Prior to Issuing of Authorisation the Authorised Provider has to provide the Regulator with a Bank Guarantee of €10,000.

6.0 Declaration of the Applicant

I, the undersigned applicant, hereby confirm that the information contained in this application (including any documents submitted) is true and correct, and that it represents accurately the information being requested.

I undertake to inform the Regulator for Energy and Water Services of any changes in the information that may occur from time to time and contained in this application, and documentation required to be submitted with this application. I also authorise the Regulator for Energy and Water Services to carry out the necessary investigations in order to verify this information. I also undertake to give any other information that may, from time to time, be requested by the Regulator.

I understand that with the granting of the authorisation being applied for, I shall automatically be subjected to the conditions of the authorisation issued by the Regulator. I also understand that the conditions listed in the authorisation may be modified as prescribed by law. I undertake to abide by any approved standards, Codes of Practice, authorisation conditions or requirements of the Regulator with regard to the activity being authorised.

I understand that the granting of the authorisation being applied for will not exonerate me from obtaining and, or maintaining any other authorisation, licence or permit as required under any law or legal obligation. I understand that the Regulator may suspend or revoke my authorisation should it transpire that the information submitted in this application is not correct, and, or if I fail to abide with any approved standards, Codes of Practice, conditions or requirements of the Regulator.

Please tick "✓" against the appropriate box:

- ☐ I declare that I have NOT been found guilty and, or have NOT been convicted of a criminal offence and, or have NOT been subject to any form of enforcement action by any official authority in the past 5 years and, or there are NO pending charges against me.
- ☐ I declare that I have been found guilty and, or convicted of a criminal offence and, or have been subject to an enforcement action by an official authority in the past 5 years and, or there are pending charges against me².

Please tick "✓" against the appropriate box:

- ☐ I declare that I have NEVER had a licence or permit and, or other form of registration of any kind refused, suspended, revoked or cancelled by any regulatory authority.
- ☐ I declare that I have had a licence or permit and, or other form of registration of any kind refused, suspended, revoked or cancelled by any regulatory authority.

_____/_____/_____
Signature of applicant (in agreement of all of the above in its entirety) Date

7.0 Data Protection Notice

In processing your personal data, the Regulator will comply with binding legislative requirements imposed by the General Data Protection Regulation EU 2016/679 (the "GDPR") and national Maltese law requiring an adequate data protection standard.

The processing of your personal data by the Regulator shall be done in the performance of a task carried out in the public interest or in the exercise of official authority vested in the Regulator and, or in compliance with a legal obligation.

In terms of these legal bases, the Regulator sometimes shares your personal information with third parties, including Government Departments (such as the Department of Customs, the Department of Health, the Civil Protection Department), other regulatory authorities (such as the Transport Authority, the Occupational Health and Safety Authority, the Planning Authority, the Environment and Resources Authority, the Malta Competition and Consumer Affairs Authority) and other Government Agencies and entities such as the Energy and Water Agency and the National Statistics Office.

You may access the Regulator's Data Privacy Policy at: <https://www.rews.org.mt/#/en/a/51-privacy-policy>

8.0 Application Fee

The non-refundable application fee for this application is €500 (Five Hundred Euro).

For office use

Received by: _____

Official stamp: _____

Date: ____/____/____

² Please provide details on a signed separate sheet. Additional sheets shall be individually numbered and signed by the applicant.