REGISTRATION AS A PRODUCER OF A VEHICLE(S) - 2011

L.N. 99 of 2004 - Waste Management (End-of Life Vehicles) Regulations, 2004
L.N. 106 of 2007 - Waste Management (Activity Registration) Regulations, 2007

Completed forms are to be sent by post to ***Unit D, MEPA, P.O. Box 200, Marsa, MRS 1000***

PLEASE COMPLETE IN BLOCK LETTERS

Please read through this form before you start to fill it in.

When you need to fill in this form

L.N. 99 of 2004 defines a vehicle as any motor vehicle used for the carriage of passengers and comprising no more than eight seats in addition to the driver's seat and having a maximum weight not exceeding five metric tones, vehicles used for the carriage of goods and having a maximum weight not exceeding 3.75 metric tones intended for use on the road, and three-wheel motor vehicles, but excluding motor tricycles.

You will need to fill in the whole form if you are manufacturing or importing vehicle(s) into Malta. Your registration may be considered invalid if you fail to complete the form adequately.

Producers of a vehicle(s) are required to register with MEPA.

Please ensure that the filled-up form reaches us by the **31 August 2011**.

Failure to do this would mean that you are in breach of the Regulations.

A copy of the Regulations can be found on the MEPA website: www.mepa.org.mt

If you need help and advice

Please contact us if you need any advice on how to provide the information needed on email elv@mepa.org.mt or on telephone no. 2290 7240.

Keeping a copy

You should keep a copy of the filled-up form and supporting information that you submit for 4 years. We may ask to see the copies when we monitor your performance.

First time Registration ☐ Renewal ☐

If a renewal what is your Producer Registration No.

Applicant Details

Trading name of business (if applicable).

Full company name if different from above

Full address of office
(If the producer is not a company, the full address of the principal place of business is to be given).

Address:
Postcode:
Phone:
Fax:
E-mail:

VAT Number:
NACE Code:

Company Registration Number:

Contact Details

Please state the details of the person to whom the Competent Authority may address questions about the application.

Title:	**First name:**
Last name:	
Position:	
Address:	
Postcode:	
Phone:	
Fax:	
E-mail:	

The range of the Number of Employees for your company:

1-9	☐	100-149	☐
10-29	☐	150-249	☐
30-49	☐	250-499	☐
50-99	☐	500+	☐

DATA ON VEHICLES manufactured/imported during 2010

Please state below the total no. of vehicles and their total wieght manufactured/imported during the period ***1 January – 31 December 2010.***

Vehicle type e.g. 4-wheel drive, 2 seater, etc	Quantities of vehicles manufactured/imported (in numbers)	Total weight of vehicles manufactured/imported (tonnes)

The total average lifespan of a vehicle _____.

Data Protection Clause

PLEASE READ THE FOLLOWING BEFORE SIGNING

In terms of the Data Protection Act (Chapter 440 of the Laws of Malta), we will process any personal and/or sensitive data supplied on/in this application, request or notification form or subsequently supplied by yourself, whether orally or in writing, for all or any of the following:

1. The proper processing of your application, request and/or notice as submitted;.
2. Preventing, detecting and/or prosecuting fraud and any other criminal activity which the Authority is bound to report and/or act upon whilst meeting any other specific legal or regulatory obligations;
3. Establishing, exercising or defending any legal action;
4. Internal management, research and statistics, systems administration, the development and improvement of our services;
5. The protection and promotion of our legitimate interests and the proper conduct of our obligations arising under any law or statutory instrument; and
6. To make public the necessary information as specified in the relevant law and/or instrument.

Relevant data will be disclosed or shared as appropriate with all our employees and with other third parties if pertinent to any of the purposes listed above.

Every field on the form is mandatory. Should you fail to fill in amy mandatory field, we reserve the right to refuse the application. Should any field be inapplicable to your particular circumstances please mark that field with the letters “N/A”.

You have the right to require that we provide you with access to your personal data as well as the right to rectify, or, in appropriate circumstances, erase/edit any inaccurate, incomplete or immaterial personal data which is being processed. However, you are required to inform us immediately of any alterations relating to your personal data which we are processing.

By signing this form, you confirm that you are giving your explicit consent, in terms of the Data Protection Act, on behalf of yourself and all the other persons specified in this form for the Authority to process your respective personal information as outlined above and you confirm that you have brought this Data Protection notice to the attention of these other persons and obtained their respective consents.

We undertake to implement the appropriate measures and safeguards for the purpose of protecting the confidentiality, integrity and availability of all data processed.

Declaration

It is an offence if you deliberately give false or misleading information. You may be liable to prosecution. The application must be signed by an ‘approved person’.

I declare that the information in this application and data form is true to the best of my knowledge and belief.

I understand that registration may be refused if I give false or incomplete information.

I agree to inform you of any changes to the information given on this application within 20 working days of the change.

Signature of applicant

Name

Position

Date (DD/MM/YYYY)

For MEPA use only

Date stamp

Producer registration number