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| **Third Party Outlet Verification form for the Recycling or Recovery of Waste Tyres.****DIRECTIONS OF USE**A separate form is required for each facility used by an Authorised Waste Collector.All information fields are to be completed. In the event, the relevant requested information is not applicable (N/A), please enter N/A and the reason why. Provision of inadequate information will delay and or prohibit their use for contract service purposes**. All supporting documentation must be in English.** |
| **Third Party Company Details** |
|  |  |  |  |  |  |  |  |  |  |
| **Registered Name of Company** |  | Click here to enter text. | **Registered Business Address** |
|  |  |  |  | Click here to enter text. |
| **Managing Directors Name** |  | Click here to enter text. | Click here to enter text. |
|  |  |  |  | Click here to enter text. |
| **Managing Directors Name Telephone Number** | Click here to enter text. | Click here to enter text. |
|  |  |  |  |  |
| **Managing Directors Email Address** | Click here to enter text. |  |
|  |  |  |  |  |
| **Contact Name(s) if different from above** | Click here to enter text. |
|  |  |
| **Contact Details** |
| **Work Phone Number**  | Click here to enter text. |  |
| **Contact’s E-Mail address**  | Click here to enter text. |  |
| **Contact’s Website Address** | Click here to enter text. |  |
| **Mobile Telephone Number** | Click here to enter text. |  |
| **Company Email Address** | Click here to enter text. |  |
| **Company Registration Number or Other as Appropriate (e.g. Business Licences):** |
| Click here to enter text. |
|  |
| **Relevant Information** |
| **Provide Statement of Function e.g. Processing, Manufacture, Energy generation with recovery (e.g. Combined Heat & Power),**  |
| Click here to enter text. |
|  |
| **Licenced Tonnage Capacity (Please provide statement)** |
| Click here to enter text. |
|  |
| **List any international ISO or Other equivalent quality standards** |
| Click here to enter text. |
|  |
| **Licences (Collection, Waste permit, EPA Licences, Broker Certificate, Import licence, business licence, State or local Environmental Regulatory licence (English language), etc.)** |
| Click here to enter text. |
|  |
| **Corporate Social Responsibility – Please provide policy of outlet.** |
| Click here to enter text. |
|  |
| **Demonstration of Due Diligence - Have you visited and inspected the third party outlet? – Provide Statement of confirmation.** |
| Click here to enter text. |
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| This form and the information contained herein is for REPAK ELT’s internal purposes only to ensure REPAK ELT’s compliance. The Authorised Waste Collector is liable for the veracity and accuracy of the information supplied in this form of which REPAK ELT will not carry out further due diligence. In the event the information supplied in this form is used, interpreted or relied upon by any other party whosoever, they do so entirely at their own risk. REPAK ELT does not accept any liability whatsoever for any loss or damage howsoever arising (including indirect and direct loss), as a consequence of any party using, interpreting or relying on the information as supplied herein. For the avoidance of doubt, the Authorised Waste Collector agrees to indemnify and hold REPAK ELT harmless from and against any and all claims, damages, liabilities, fees, losses, fines, taxes, penalties, and/or expenses, including reasonably and properly incurred legal fees suffered or incurred by REPAK ELT arising from any action, or allegations related to, arising from, or resulting from the Authorised Waste Collector’s supply of information hereto. |
| We accept full liability associated with the use of this third party and that Repak ELT have no liability or responsibility in respect of same. |
|   |  |  |  |  |  |  |  |  |  |
| **By ticking this box we confirm and accept the Terms and Conditions above.** |[ ]  **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  |  |  |  |  |  |  |  |  |
| **Date** | Click here to enter text. |
|  |
| Should you have any queries completing this form, please contact Mark Gillick on 01 461 8600 or mark.gillick@repakelt.ie  |