



To operate a facility acquiring, retaining, using and/or transferring Schedule 1 chemicals: Consumption Facility - Permit Application / Renewal Form - Notification Form

Chemical Weapons (Prohibition) Act 1994 - sections 17(1), 20(1), 29 (1)

PLEASE READ THE GUIDE TO THIS FORM BEFORE COMPLETING IT

Indicate whether this is an Application [] or a Notification [] for calendar year:

Section A. Organisation/Institution operating facility

(CWCO reference: Site code:)

Table with 11 rows for facility details: 1. Facility name, 2. Name of the operator, 3. Postal address, 4. Street address, 5. Facility location co-ordinates (Latitude/Longitude), 6. Facility building number, 7. Contact, 8. Title, 9. Contact Details (tel/fax), 10. Principal Researcher, 11. Contact Details (tel/fax).

If the form is being completed as a notification, and not a permit application, go to question 23

12. In the initial application enclose, as Attachment A, a detailed technical description of the facility, including facility diagrams, an inventory of equipment and a description of other Schedule 1 chemicals used and/or stored at the facility.

Section B Details of anticipated activities at the Consumption Facility with Schedule 1 chemicals for the calendar year for which the permit is sought

USE ONE COPY OF THIS PAGE FOR EACH SCHEDULE 1 CHEMICAL TO BE ACQUIRED, RETAINED, USED AND/OR TRANSFERRED

13. IUPAC chemical name or, if unknown, Schedule 1 family name	
14. Structural formula	
15. CAS registry number (if assigned)	
16. Quantity likely to be acquired	
17. Details of supplier	
18. Maximum quantity likely to be retained	
19. Quantity likely to be used	
20. Nature of Use	<p>Please describe (in words):</p> <input type="checkbox"/> Research <input type="checkbox"/> Medical <input type="checkbox"/> Pharmaceutical <input type="checkbox"/> Protective
21. Quantity likely to be transferred from the facility	
22. Details of recipient of any likely transfer	

Section C. Confidentiality

23. If there is any information in this form which you believe requires particular protection, describe that information against the appropriate classification :

classification	
OPCW - Restricted	
OPCW - Protected	
OPCW - Highly Protected	

Note: The *Chemical Weapons (Prohibition) Act* prescribes penalties for the provision of false or misleading information.

Signed by/on behalf of the applicant or notifier

.....
(Signature)

.....
(Full Name)

Dated 20.....