

Water Pollution (Jersey) Law, 2000 - Article 25

Application to Transfer a Discharge Permit

The application form must be signed by the current permit holder and proposed new permit holder

1.	Discharge Permit Reference Number	
2.	Current Permit Holder Details	
	Full name and title:	
	Address:	
	Post code:	
	Contact number (Daytime):	
	Email address:	
	Address of premises where discharge is located if different to the address above.	
	Post code:	
3.	Full name and title of person to whom the permit is to be transferred:	
	Correspondence address:	
	Post code:	
	Contact number (Daytime):	
	Email address:	
	Date of proposed transfer:	

Important information:

Before signing this form please read the following consent information carefully. It explains how your information will be used and provides a brief description of your rights under Jersey’s Data Protection Law. For further information on how the Department of the Environment handles personal data please visit <http://www.gov.je/howweuseyourinfo> .

Your consent:

I declare that this application is made with my authority. I am aware that it’s an offence to submit false or misleading information with an application.

I am aware and agree to the information supplied in this form, together with any other accompanying information, to be used for the purpose of processing my application to transfer a discharge permit in accordance with Part 5 of the Water Pollution (Jersey) Law 2000.

I am aware and agree that the information supplied in this form, together with any other accompanying information:

- Will be disclosed to statutory consultees (e.g. Environmental Health) so that you may notify them about the transfer of your permit.
- May be shared with third parties who undertake property and land searches or request generic information on the location of discharge permits in relation to their own development/site.
- That as a public authority, you are subject to the provisions of the Freedom of Information (Jersey) Law 2011. Under this Law you may be required to disclose information you hold, including the contents of this form and any other information I provide to you, unless the information is protected from disclosure by an exemption under the Law or any other enactment, including the Data Protection (Jersey) Law 2018

I understand that you will not use my personal information for any other purpose, without my permission, unless you are legally required to do so.

I understand that under Jersey’s Data Protection Law I have the right to withdraw my consent to the further processing of my information. However, I understand that this may cause delays in processing my application, affect my grant payments or cause me to be in breach of other legal requirements. (Should you wish to exercise this right please contact us on tel. +44 (0) 1534 441600)

Current Permit Holder’s Signature:	
Print name:	
Position (e.g. owner, company secretary, agent etc)	
Date:	

Proposed New Permit Holder’s Signature:	
Print name:	
Position (e.g. owner, company secretary, agent etc)	
Date:	