Leeds Accredited Waste Carrier Scheme (LAWCS)

MEMBERSHIP FORM

If you require support to complete this form, please call us on 0113 378 4610. Lines are open Monday-Friday, 9am-5pm.

**Please email your completed form to** [**lawcs@leeds.gov.uk**](mailto:lawcs@leeds.gov.uk)

Membership benefits:

* Accredited listing on the Leeds Directory, connecting your business to customers
* “I’m accredited” membership pack including waste transfer receipt templates
* Access to environmental regulatory advice.

Members agree to:

* Provide all customers with clear and accurate waste receipts that include the date of collection/disposal, type of waste, theintended place of disposal, company details and Environment Agency (EA) registration number and, if applicable, scrap metal dealer license number
* Ensure you transport waste legally and only use legally compliant commercial waste disposal sites
* Prioritise recycling and reusing waste wherever possible
* Adhere to the [LAWCS Code of Good Practice](https://www.leedsdirectory.org/media/2vxag0wo/lawcs-code-of-good-practice-dec-2023.docx).

**PART A: COMPLETE FOR LEEDS ACCREDITED WASTE CARRIER SCHEME MEMBERSHIP**

|  |  |
| --- | --- |
| Name of your business |  |
| Type of service you provide |  |

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| --- | --- | --- | --- | --- | --- |
| **Section 1: Your business** | | | | | |
| 1. Please provide contact details for your business: | | | | | |
| Contact name |  | | | | |
| Position in business |  | | | | |
| Date of birth |  | | | | |
| Home address |  | | | | |
| Business address |  | | | | |
| Business phone number |  | | | | |
| Business email |  | | | | |
| Website |  | | | | |
| Social media links |  | | | | |
| 1. Has your business ever operated under a different name? | | | | **Yes  No** | |
| 1. If yes, what are the previous name(s) you operated under? | | | | | |
|  | | | | | |
| 1. Please provide your EA waste carrier registration number and, if applicable, Leeds City Council (LCC) scrap metal dealer licence number: | | | | | |
| EA Register number:  LCC Scrap Licence number: | | | | | |
| 1. Please provide details of all vehicles used by your business to carry waste.   Please use an additional sheet if you need to record more vehicles. | | | | | |
| **Vehicle make and model** | | **Registration Number** | **Vehicle make and model** | | **Registration Number** |
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| 1. Which business waste disposal site(s) do you use? | | | | | |
|  | | | | | |
| Section 2: Your service offer – this will appear as your advert on the Leeds Directory | | | | | |
| 1. Please provide a description of your service. This must include what types of waste you will remove, for example household, garden, bulky item etc. Please write no more than 200 words. | | | | | |
| 1. When is your service available? i.e., your working days and hours. | | | | | |
|  | | | | | |
| 1. What postcode areas of Leeds do you cover? If all, please state “all”. | | | | | |
|  | | | | | |
| 10. How did you hear about Leeds Accredited Waste Carriers Scheme? | | | | | |
|  | | | | | |
| I agree to the Leeds Directory terms and conditions, and accept the Code of Good Practice  I agree to Leeds City Council checking their records for any outstanding environmental offences investigations or fines relating to the information I have provided  I agree to update Leeds City Council if any of the information provided in this form changes | | | | | |
| Signed (print name)      Date | | | | | |

**If you are applying for LAWCS membership only (PART A), please email your completed form to** [**lawcs@leeds.gov.uk**](mailto:lawcs@leeds.gov.uk)**.**

We aim to respond to all LAWCS application requests within 10 working days.

**PART B: COMPLETE FOR GREEN TICK ACCREDITATION**

You can choose to apply for LAWCS membership only (PART A) or continue to register for the optional enhanced Green Tick accreditation by completing PART B.

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Do you use “day labour”, e.g., subcontractors or casual workers? | | **Yes  No** | |
| 1. Please tick where applicable:   I do not use “day labour” at all and will advise Leeds Directory immediately if this changes in the future.  I use “day labour” and accept full responsibility for the work and behaviour of those I employ to provide services in my name.  I understand that if the “day labour” I use fails to deliver services in line with the standards outlined in the LAWCS Code of Good Practice that I may be removed from the Leeds Directory. | | | |
| 1. What type of service are you? | Agency | |  | |
| Ltd Company | |  | |
| Partnership | |  | |
| Social Enterprise | |  | |
| Sole Trade | |  | |
| Other | |  | |
| 1. You will need to provide some additional documents as evidence to register with Leeds Directory. For support and guidance please email [leedsdirectory@leeds.gov.uk](mailto:leedsdirectory@leeds.gov.uk) within 8 weeks of applying for the accreditation. | DBS Disclosure Certificate | |  | |
| Subcontractors Disclaimer Form | |  | |
| Copy of your Public Liability Insurance | |  | |
| A copy of your business stationery | |  | |
| Health & Safety Disclaimer | |  | |

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