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## APPLICATION FOR SEWERAGE SERVICE PROVIDER'S LICENCE

**OUR Act as amended by the OUR Amendment Act**

### ***SECTION A - COMPANY INFORMATION***

(Applicable to all Applicants)

- Name of Applicant: \_\_\_\_\_  
\_\_\_\_\_
- Trading Name (if different from 1 above): \_\_\_\_\_  
\_\_\_\_\_
- Registration Number (if a limited company): \_\_\_\_\_
- Registered Office of Applicant (if a limited company):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Principal place of business: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Authorized representative to contact about this application:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email Address: \_\_\_\_\_
- Legal Status (indicate one)
 

<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Partnership
<input type="checkbox"/> Individual	<input type="checkbox"/> Corporation
<input type="checkbox"/> Other _____	
- Certified copy of Memorandum of Association
- Certified copy of Certificate of Incorporation

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The management and staff of the **OUR** are committed to **R**egulating **U**tility services in accordance with our **L**egislative powers and to the **E**nhancement of customer **S**atisfaction through continual improvement of our quality management system.

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- 10. Names, business addresses and dates of appointment of directors, chief executive officer and company secretary
- 11. Names, addresses and country of domicile and shareholdings of all shareholders holding more than 10% of any class of the shares of the applicant

**(Note: Items 6 - 9 should be attached and labeled supporting documentation)**

- 12. Structure of Company:  
Major shareholders: \_\_\_\_\_  
\_\_\_\_\_  
Departments: \_\_\_\_\_  
\_\_\_\_\_  
Number of Employees: \_\_\_\_\_  
Type of Employees: \_\_\_\_\_

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***SECTION B - FINANCIAL INFORMATION***

1. Customer Base:  
 Total number of customers: \_\_\_\_\_  
 Customers per category: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 Other \_\_\_\_\_  
 Expected growth: \_\_\_\_\_
  
2. If new business:  
 Projected Customer Base: \_\_\_\_\_  
 Category Type: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Other \_\_\_\_\_
  
3. Sewerage service:
  - a. If service is being provided, at least three (3) years data on:
    - (i) Volume of sewage treated per year \_\_\_\_\_
  
  - b. If new service, three years (3) projected data on:
    - (i) Volume of sewage expected to be treated per year \_\_\_\_\_
  
4. Tariff structure and billing: (additional information should be attached and labeled supporting documentation)
  - a. If service is being provided, at least three (3) years data on:
    - (i) Rates charged per customer category:  
 Residential \_\_\_\_\_ Commercial \_\_\_\_\_  
 Industrial \_\_\_\_\_ Other \_\_\_\_\_
    - (ii) Revenue per customer category:  
 Residential \_\_\_\_\_ Commercial \_\_\_\_\_  
 Industrial \_\_\_\_\_ Other \_\_\_\_\_
    - (iii) Total revenue billed per year \_\_\_\_\_
    - (iv) Total revenue collected per year \_\_\_\_\_
  
  - b. If new service, three (3) years projected data on:
    - (i) Rates to be charged per customer category:  
 Residential \_\_\_\_\_ Commercial \_\_\_\_\_  
 Industrial \_\_\_\_\_ Other \_\_\_\_\_
    - (ii) Expected revenue per customer category:  
 Residential \_\_\_\_\_ Commercial \_\_\_\_\_  
 Industrial \_\_\_\_\_ Other \_\_\_\_\_
    - (iii) Total revenue to be billed per year \_\_\_\_\_
    - (iv) Total revenue to be collected per year \_\_\_\_\_
  
5. Finance (additional information should be attached and labeled supporting documentation)
  - a. If service is being provided, last three (3) years audited:
    - (i) Profit and Loss Statement
    - (ii) Balance Sheet
    - (iii) Cash Flow Statement

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- b. If new service, three years projected data on:
- (i) Expected tariff to be charged per customer category
  - (ii) Projected Revenue
  - (iii) Employee costs
  - (iv) Operating costs
  - (v) Operating profit per year

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**SECTION C – DETAILS OF SERVICE**

1. Service area (**information should be attached and labeled supporting documentation**)

a. Precise definition of the geographic area supplied

(i) Exact location and boundary (in words) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(ii) Exact size \_\_\_\_\_

\_\_\_\_\_

b. If service area is specific to a subdivision or similar area:

Description of subdivision:

(i) Number of lots \_\_\_\_\_

(ii) Types of lots:

Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Industrial \_\_\_\_\_ Other \_\_\_\_\_

(ii) Total area per lot type \_\_\_\_\_

(iii) Total serviceable area (excluding roads) \_\_\_\_\_

2. Service type: (i) Treatment plant: [yes] [no]; Number: \_\_\_\_\_

(ii) Pumping Station: [yes] [no]; Number: \_\_\_\_\_

(iii) Trunk sewer: [yes] [no]; Kilometres: \_\_\_\_\_

(iv) Collection sewer: [yes] [no]; Kilometres: \_\_\_\_\_

3. a. Licence and permit from National Environment Protection Agency (NEPA) to discharge sewage and treated effluent from sewage treatment facilities

b. For discharge into a municipal system, permit from NEPA authorizing discharge of sewage effluent (and connection) to municipal sewage system and agreement with municipal system operator.

**(Note: 3a & 3b should be attached and labeled supporting documentation)**

4. Description of major plant \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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5. Location of plant

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6. Last three (3) quarterly wastewater and effluent quality reports on (**information should be attached and labeled supporting documentation**):

- a. Biochemical Oxygen Demand (BOD)
- b. Total suspended solid (TSS)
- c. Chemical oxygen demand (COD)
- d. Total nitrogen
- e. Phosphates
- f. Residual chlorine
- g. Faecal coliform
- h. pH

7. Details of maintenance programme (**information should be attached an labeled supporting documentation**)

- a. If service is being provided, details of the last year's maintenance programme plus one year projected maintenance programme.
- b. If new service, details of one year's projected maintenance programme

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**SECTION D – HISTORY OF APPLICANT**

**Tick the appropriate box. If "YES" give particulars. If necessary, attach and label 'supporting document'.**

1. Has the Applicant ever applied for a licence or registration under any Act in Jamaica and been refused?

Yes     No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Is the Applicant engaged in a sewerage related business in any other country?

Yes     No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Has the Applicant operated under or carried on business under any name other than the name in this application?

Yes     No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Has the Applicant at any time declared bankruptcy or made a voluntary assignment in bankruptcy?

Yes     No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Has the Applicant ever been the defendant or respondent in any proceedings in any court in any jurisdiction in any part of the world involving fraud?

Yes     No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Has the Applicant, or any director or executive officer of the Applicant, ever pleaded guilty under any law of Jamaica or any other country of any offence involving dishonesty, fraud or theft?

Yes     No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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7. Has the Applicant, or any director or executive officer of the Applicant, ever been convicted of any offence not mentioned in number 6?

Yes       No

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13. Is the Applicant, or any director or executive officer of the applicant, currently the subject of a charge or indictment under any law of Jamaica or any other country for contravention of any law or for any conduct of the type described in number 6 and 7?

Yes       No

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Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20

\_\_\_\_\_  
**Signature of applicant**

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**SECTION E - DECLARATION OF APPLICANT**

I(we), \_\_\_\_\_ declare  
that: *( Name of Applicant)*

- (i) I(we) am(are) not disqualified from being granted a licence by reason of any legal impediment. I(we) possess the technical qualifications to fully perform the obligations imposed by the licence. I(we) satisfy the financial requirements for the construction and operation of the facility or provision of service to which this application relates.
- (ii) I(we) am(are) a fit and proper person to be granted a licence,
- (iii) All information submitted in favour of this application is true and correct. I(we) understand that a recommendation for approval from the Office of Utilities Regulation (OUR) in respect of this application would be based on information as declared herein. I(we) understand that, if I(we) knowingly make any false statement in this application, any licence granted pursuant to this application may be revoked.
- (iv) OUR reserves the right to independently verify all information provided.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Affix Company Seal here**