



MAYO COUNTY COUNCIL

**Dangerous Substances Act 1972
Dangerous Substances (Flammable Liquids and Fuels Retail
Stores) Regulations, 2019
Driver Controlled Deliveries Application Form**



Driver Controlled Deliveries Application

Application Requirements

1. Completed application form.
2. Copy of valid license to store Flammable Liquids and Fuels for this site.
3. Copy of valid Stage 1B vapour recovery certificate for this site. (Stage II if applicable)
4. Submit detailed report to demonstrate it is adapted and suitably equipped for DCD to be performed in compliance with the Approved Code of Practice Health and Safety Executive (HSE) (UK) L133 Unloading of petrol from road tankers.
5. Submit a detailed site plan (3 No. copies) clearly indicating the location(s) of equipment to comply with(HSE) (UK) L133 Unloading of petrol from road tankers.
6. Submit site procedures for Driver Controlled Deliveries covering the ;
 - Tanker Unloading: General Duties
 - Risk Assessment
 - Overfills and Spillages
 - Responsibilities of the Road Tanker Operator
 - Responsibilities of the Road Tanker Operator
 - Responsibilities of the Tanker Driver
 - Additional Requirements for Pumped Deliveries

In accordance with (HSE) (UK) L133 Unloading of petrol from road tankers Paragraphs 19 to 132.
Also refer to - Petrol Filling Stations Guidance on Managing the Risks of Fire and Explosion (The Red Guide)





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For Office Use

Date Received: _____

Receipt No: _____

Register Reference: _____

Planning Reference: _____

Fee Received Date: _____

Premises Number: _____

1. Applicant/Licensee/Owner or Operator:

Name and address/registered office of the company, firm or person: -

Phone No. _____

Eircode. _____

2. Location of retail store: -

Address _____

County _____

Place or Townland _____

Ordnance Survey Map reference _____

Eircode. _____

3. Name of Consultant/Designer:

Name and address of person(s) or firm(s) responsible for preparation of accompanying plans, calculations and specifications: -

Email: _____

Phone No. _____



4. Particulars of Plans accompanying this application (may be detailed on separate sheet):

Declaration

I, _____, hereby certify that the information supplied above is true to the best of my knowledge and belief.

Signature of applicant: _____

Postal address of applicant: _____

Date of application: _____

