



## New Customer Form

Please complete the attached electronically and return to [accounts@lerecycle.ie](mailto:accounts@lerecycle.ie) and [logistics@lerecycle.ie](mailto:logistics@lerecycle.ie). Thank you.

### BUSINESS CONTACT INFORMATION

Legal Company Name: _____	Registered Company Address: _____
Business Trading Name: _____	_____
Phone Number: _____	County: _____ Country: _____
Fax Number: _____	EORI Number: _____
Website: _____	<b>Unloading Address:</b> _____
Date of Incorporation: _____	_____ County: _____
Company Reg Number: _____	Country: _____ Postcode: _____
Tax Clearance Cert Details: (Irish customers) _____	Licence No./Permit No: _____
_____	_____
VAT Number: _____	Tel: _____
Brokerage Licence: _____	Contact Name: _____
Facility Licence: _____	Site Opening times: _____
Credit Limit Requested: _____	Special Instructions: _____
Credit Limit Approved (internal use only) _____	_____

### MANAGING DIRECTOR CONTACT INFORMATION

First Name: _____	Email Address: _____
Last Name: _____	Phone Number: _____

### OPERATION DETAILS

Registered Licence: _____	Registered Capacity: _____
Compliance & Environmental Breaches: _____	
_____	

Specific Services Third Party Outlet will carry out for recovery operator: \_\_\_\_\_

### TRADE REFERENCES

TRADE REFERENCE 1	TRADE REFERENCE 2
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
County: _____ Country: _____	County: _____ Country: _____
Tel: _____	Tel: _____
Email: _____	Email: _____

**CONTACT DETAILS:**

	Name	Direct Tel	Mobile	Email
Owner:				
Sales:				
Accounts Payable:				
Logistics/Admin:				
Operations Manager:				
Financial:				
Documentation/Annex:				
Compliance / Brexit:				
Other:				

**BANK DETAILS:**

Account Name: \_\_\_\_\_  
Account No.: \_\_\_\_\_  
Sort Code: \_\_\_\_\_  
Swift Code: \_\_\_\_\_  
IBAN No.: \_\_\_\_\_  
Currency: \_\_\_\_\_  
Bank Name: \_\_\_\_\_  
Branch Address: \_\_\_\_\_  
Payment Terms: \_\_\_\_\_

**OUTLET AUTHORISED COMPANY SIGNATORY:**

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**PROVIDED SERVICES:**

Broker:	<input type="checkbox"/>	SRF Producer:	<input type="checkbox"/>
REPAK Registered RO:	<input type="checkbox"/>	WtE Facility:	<input type="checkbox"/>
Plastic Re-Processor:	<input type="checkbox"/>	Manufacturer:	<input type="checkbox"/>
Recycler (Recycler Facility):	<input type="checkbox"/>		

Do you undertake any of the following activities?	Please provide details of equipment used	Capacity (tph)
Sorting <input type="checkbox"/>		
Baling <input type="checkbox"/>		
Grinding <input type="checkbox"/>		
Washing <input type="checkbox"/>		
Extrusion <input type="checkbox"/>		

Please provide details of any waste water treatment equipment you have... \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have the following , and if so please provide copies translated into English	Yes	Copy attached (in English)
Company Registration Document		
Waste Collection Permit		
Waste Facility Licence		
Environmental Protection Agency Licence		
Waste Brokers Licence		
State or Local Environmental Regulatory Licence		
ISO 9001 Certificate		
ISO 14001 Certificate		
ISO 18001 Certificate		
Health & Safety Policy		
Environmental Policy		
Quality Policy		
Sustainability Policy		
Ethical Business Policy		
Antibribery Policy		

Do you part-take, or plan to part-take in any other environmental or sustainable initiatives/activities which we should be aware of? Please provide details \_\_\_\_\_

Please answer the following questions:

Do you avoid the use of child labour in accordance with the applicable national standards and the principles of international conventions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you avoid the use of forced labour in accordance with the applicable national standards and the principles of international conventions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you ensure safe and healthy working conditions for workers, in particular with the aim of avoiding risks and preventing accidents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you recognise workers and employee rights?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you ensure equal treatment for all workers irrespective of criteria such as ethnicity, sexual orientation, gender, age, union membership and religious views?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you guarantee minimum pay for workers in accordance with applicable national standards and statutory regulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you address your organisations carbon footprint within the environmental policy or the sustainability policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you generate any of your energy needs from renewable power?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Can you please confirm which of the below relates to how material is handled in your unloading facility:

R-3 is reprocessing of the material

R-12 is small recovery as sorting and bailing etc

R-13 is storage only

Can you add a brief summary of your business operations: \_\_\_\_\_

I hereby declare that...

I am authorised to enter into deals

I have read the terms and conditions

**ON BEHALF OF THE CUSTOMER:**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_

**ON BEHALF OF LEINSTER ENVIRONMENTALS:**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_

## COMPANY KEY INFORMATION

Legal company name: Lenviron Ltd

Trading name: Leinster Environmentals

### Registered Address:

Clermont Business Park, Haggardstown, Dundalk, Co. Louth, Ireland, A91 HPK7

### Office Number:

+ 353 (0)42 93 23997

### Office opening times:

Monday -Friday 08:00 - 17:00

### Waste permit & relevant info:

TFS Waste Management Registration Number: IRE/G614/23

EORI Number: IE8258079C

VAT Reg Number: IE8258079C

CRO Number: 258079

### Purchasing Department:

Ireland:	Ray	ray@lerecycle.ie	+353 (0)96 83828
United Kingdom:	Gerry	gerry@lerecycle.co.uk	+44 (0)75 1985 9623

### Sales Department:

James:	james@lerecycle.ie	+353 (0)872302616
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### Logistics Department:

Elaine:	logistics@lerecycle.ie	+353 (0)42 93 23997
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### Compliance Department:

Sheila:	sheila@lerecycle.ie	+353 (0)42 93 23997
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### Accounting Department:

Joanne:	accounts@lerecycle.ie	+353 (0)42 93 23997
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## TRADE REFERENCES

### Trade reference 1:

WOODSIDE IRELAND LTD

Bond Road, Dublin Docks,  
Dublin 3, Ireland

Contact name: Mark Woodside

Email: markwoodside@woodsides.com

Number: 02893343031

### Trade reference 2:

SUREFREIGHT LTD

Unit 4, Shepards Drive Carnbane Industrial  
Estate, Newry, Co. Down, BT35 6JQ,  
Northern Ireland

Contact name: Stuart McAdam

Email: stuart@surefreight.co.uk

Number: 048 3026 4127

To Be Completed by Leinster Environmentals Personnel Only

Was a due diligence visit carried out	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the facility broadly in line with expectations	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the facility broadly in line with international standards	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are photographs available	<input type="checkbox"/> Yes	<input type="checkbox"/> No

