



Scottish Landfill Communities Fund

Contribution received from a landfill operator

Your contact details

1. Name of your Approved Body

2. Your AB registration number

3. Your organisation's address for invoicing
Address

Town
County
Post code

Contributions

4. Name of the person (landfill operator) making the contribution

5. Landfill operator Permit / Licence number

6. Date you received the landfill operator's contribution.

7. Amount received from the landfill operator in this transaction

£

8. If you know the project that this is going to be spent on, please indicate the enrolment number here.

9. Have you received any third party contributions in connection with the above?

Yes

No

10. Name of the third party making the contribution

11. Address of Third Party:
Address

Town
County
Post code

-
12. Date you received the third party's contribution.
13. Amount received from the third party in this transaction £

Declaration

14. Your signature:
- Your Name: Date:

Notes

Regulation 30(1)(f) of the Scottish Landfill Tax (Administration) Regulations 2015 requires you to notify SEPA within 7 days of the receipt of each qualifying contribution. This form should be used to notify us of contributions received. This form should not be completed to notify SEPA of a transfer of funds from another Approved Body.

This form sets out the statutory information that an AB must provide to us to comply with the Regulations. Failure to provide this information by the statutory deadline may result in enforcement action being taken.

Please complete this form electronically and return to SLCF@sepa.pnn.gov.uk

If you would prefer to submit a paper form, please complete in black ink using BLOCK CAPITALS and send to:

SEPA
SLfT Unit
Angus Smith Building
6 Parklands Ave
Eurocentral
Holytown
North Lanarkshire
ML1 4WQ

Please also keep a copy for your records.

For further information, or if you have any questions on this form, please contact SEPA on **03000 99 66 99** or at www.sepa.org.uk
