**APPLICATION FORM FOR THE APPROVAL OF LOCATION OF A FUEL FILLING STATION**

|  |
| --- |
| 1. **APPLICANT IDENTIFICATION**
 |
| Name or Company Designation: |
| Type of Identification Document: | Identification Document No.:  |
| Taxpayer Identification No.: |
| Certificate of Registration No.: | Share Capital |
| License to Business No.: |
| Representative: |
| Address: |
| District: | Sub-District: | Suco: |
| Aldeia: |
| Telephone: | E-mail address: |
| Fax: |  |

|  |  |
| --- | --- |
| 1. **LICENSE OF TYPE**

………………….. |  |
|  | **For ANP’s exclusive use**Please tick “√” against the appropriate box: |
|  Existing Fuel Filling Station | Has the applicant submitted this application within 90 days after the publication of Regulation No. 1/2013 |  Yes No(if not treat as new application) |
|   Amendment to existing Fuel Filling Station  | Includes new constructions in existing facilities, major modifications, relocation of structure, demolitions, etc. |
|   New Fuel Filling Station |  |

|  |
| --- |
| 1. **TYPE OF FUEL FILLING STATION**

Please tick “√” against the appropriate box: |
| Automotive Fuel Filling Station | Proposed Utilization:Retail Filling StationHome Base Filling Station |
| Marine Fuel Filling Station |
| Aviation Fuel Filling Station |
| Atypical Fuel Filling StationPlease provide details  |

|  |
| --- |
| 1. **GENERAL LOCATION CONDITIONS**

Please tick “√” against the appropriate box: |
| **Note:** The minimum radius distance is only applicable to New Automotive Retail Fuel Filling Stations. It is not applicable to Fuel Filling Stations of any nature that already exist or to the installation of new Home Base Fuel Filling Stations |
| Nearest Filling Station Automotive Filling Station  Atypical Filling Station - Description:  | Distance: Km Km |
| **LOCATION** |
| Located in urban area or village? |  Yes No |
| Located under, in or on building? |  Yes No |
| Located in or on underground car parks? |  Yes No |
| Located in sensitive areas? |  Yes No |
| Located on a road? |  Yes No |
| Located on a motorway? |  Yes No |

|  |
| --- |
| 1. **TITLE OVER LAND WHERE THE STATION IS IMPLANTED**

Please tick “√” against the appropriate box: |
|  | **For ANP’s exclusive use**Please tick “√” against the appropriate box: |
|  Owned Leased OtherProvide details  | Has the applicant submitted land registration documents, copy of executed agreement or Power of Attorney (if the grantor of land rights is acting on owner’s behalf as his/her legal representative)? |   Yes No |
| Current use of the site: (Please Provide details) |

|  |
| --- |
| 1. **MAP**
 |
| **Note:** Please show location of site and of other relevant facilities and building under article 7. 10. and 13. of Regulation No. 1/2013. |
|  **599px-Cardinal_directions** |
| Geographic reference: |  |
| ⧠ Please mark if additional information is provided in Annexes |

|  |
| --- |
| 1. **ADDITIONAL ELEMENTS**

⧠ Please mark and provide details if additional documents have been submitted and attached to the present form |
|  |
| **Annex No.** | **Name** | **Details** |
| ⧠ 1 |  |  |
| ⧠ 2 |  |  |
| ⧠ 3 |  |  |
| ⧠ 4 |  |  |
| ⧠ 5 |  |  |
| ⧠ 6 |  |  |

|  |
| --- |
| 1. **STATEMENT OF APPLICANT**

NOTE: This form and any relevant additional information is of public record and will remain on file. By filing this form you are declaring that you will not use the information you receive now or afterwards for any illegal or unlawful purposes. |
|  | **To be completed by ANP** |
| I certify that all of the information contained in this form is complete and accurate. I understand the information provided to the ANP is subject to review and audit. The detailed records which substantiate the information contained herein are available upon request.Signature:Place: Date: / /  | Fees paid:Receipt No.:Signature of the individual in charge |

|  |
| --- |
| 1. **ANP’s DECISION**

For official use only |
| Final Site approval Site Approved Site Not Approved  Deferred / Returned (additional elements required) |
| Remarks/Requirements/Procedures and respective timing: |
| Certificate of Approval of Location for Fuel Filling Station Number: |
| Approving Official**Name:****Position** **Signature**  | **ANP’s Stamp****Date:****Valid until:** |

**Notes:**

1. The applicant is required to file all documentation required by Decree-Law No.1/2012, of 1 February 2012 and regulation No.1/2012, of 24 October 2012, together with this application form;
2. Should the location of an existing fuel station be rejected, the applicant must submit a proposal for bringing the station in compliance with location rules within 90 days of refusal. Should the proposal be approved, the measures shall be implemented within 2 years of the respective approval, under pain of closure of the station;
3. Should the applicant elect not to submit the proposal referred in (b) above, the station must cease to operate within 2 years of the non-approval of this application;
4. The Applicant shall have 90 days to submit to the ANP an Application for the Approval of a project for a fuel filling station, as of the date of issuance of the certificate of Approval of Location for Fuel Filling Station;
5. The location approval shall lapse if the Fuel Filling Station is not effectively implemented within 1 year (or such longer period established by the ANP) of the date of submittal of the Application for the Approval of a project for a Fuel Filling Station, or if such Application is not submitted within the deadline referred in (d) above.