



ENERGY AND UTILITIES DEPARTMENT

CHECKLIST AND ASSESSMENT FORM
FOR SMALL-SCALE BUSINESS APPLICATION
(for issuance of Business Permit by Business Licensing Unit)

(Business/project listed at Table 7-1 of the TCI Development Manual is subject to EIA)

- New application
 Renewal

This document should be submitted to Energy and Utilities Department (EUD) along with the Application for Business License under Business Licensing Ordinance, (Amendment, No. 2, 2011)

| No. | Applicant: <i>please complete the blank spaces below. Write N/A for items that are not applicable. Submit supporting documents if required.</i> | COMMENTS/REMARKS <i>For Official Use only</i> |
|-----|--|---|
| 1 | Name of Business: Click or tap here to enter text. | Click or tap here to enter text. |
| 2 | Applicant/Owner: Click or tap here to enter text. | Click or tap here to enter text. |
| 3 | Business Address: <i>(Room No. Building No, Street name, Road Name, Island, etc.)</i> Click or tap here to enter text. | Click or tap here to enter text. |
| 4 | Contact information: Telephone No.Click or tap here to enter text. Email address:Click or tap here to enter text. | Click or tap here to enter text. |
| 5 | Immigration Status of applicant: <input type="checkbox"/> TC Islander <input type="checkbox"/> PRC Attach proof (| Click or tap here to enter text. |
| 6 | Number of Employees/Workers: Click or tap here to enter text. | Click or tap here to enter text. |



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| 7 | Do you have a business plan? <input type="checkbox"/> Yes <input type="checkbox"/> No | Click or tap here to enter text. |
| 8 | Nature of Business/Type of Business: <i>(e.g. mechanic shop, flower shop, car wash, beauty salon, etc.)</i> Click or tap here to enter text. Business Name: Click or tap here to enter text. Trade Name: Click or tap here to enter text. License Fee category: Click or tap here to enter text. | Click or tap here to enter text. |
| 9 | Location of Business: Block No.: Click or tap here to enter text. Parcel Number: Click or tap here to enter text. Land Area: Click or tap here to enter text. Floor Area of room or building: Click or tap here to enter text. | Click or tap here to enter text. |
| 10 | Business Permit No. and validity date: Click or tap here to enter text. | Click or tap here to enter text. |
| 11 | Land Ownership: <input type="checkbox"/> Freehold ownership, show proof of title Owned the land, show proof of title <input type="checkbox"/> Leasehold ownership, show proof of leasehold <input type="checkbox"/> Rented holding, show proof of rental and proof of landlord's title. | Click or tap here to enter text. |
| 12 | Source of water: <input type="checkbox"/> Provo Water <input type="checkbox"/> Cistern <input type="checkbox"/> Others, specify | Click or tap here to enter text. |
| | Source of Fuel, specify. | |
| | Number of storage tanks and capacity Number: Capacity (gallons): | |
| 13 | Sewage system <input type="checkbox"/> WWTP <input type="checkbox"/> Septic Tank <input type="checkbox"/> Others, specify | Click or tap here to enter text. |



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| 14 | Waste disposal system <input type="checkbox"/> Dispose of waste by waste company <input type="checkbox"/> Recycling | Click or tap here to enter text. |
| 15 | Availability of Fire Fighting System No. of Fire Extinguisher Units = Type of Fire Extinguisher = | Click or tap here to enter text. |
| 16 | Security System <input type="checkbox"/> CCTV installed and functional, provide details: number, types/model, etc. <input type="checkbox"/> Contracted Security Agency, specify: <input type="checkbox"/> Padlocked the door(s) | Click or tap here to enter text. |
| 17 | Is the property fenced? <input type="checkbox"/> Yes <input type="checkbox"/> No, if yes, type of fence? | Click or tap here to enter text. |
| 18 | Potential Noise generated by the business <input type="checkbox"/> Yes <input type="checkbox"/> No | Click or tap here to enter text. |
| 19 | Do you have a Hurricane Preparedness Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have mitigation measures? | Click or tap here to enter text. |
| 20 | Do you have an Oil Spill Mitigation Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have mitigation measures? | Click or tap here to enter text. |
| 21 | Drainage around the property/catchment system <input type="checkbox"/> drainage/canal well established & maintained <input type="checkbox"/> no drainage/canal | Click or tap here to enter text. |
| 22 | Other notable information, specify. Click or tap here to enter text. | Click or tap here to enter text. |

| No. | Required Documents <i>(Please submit the following documents with this application. Non-submission of the required documents may delay the processing of this application).</i> | For Official Use only |
|-----|---|--------------------------|
| 1 | Business Plan, detailed description of the business proposal and/or Feasibility study (submit digital and printed copy) | <input type="checkbox"/> |



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| 2 | Location of the proposed project (Block and parcel numbers; title number, etc.) | <input type="checkbox"/> |
| 3 | Location and site boundaries, floor plan | <input type="checkbox"/> |
| 4 | Oil Spill Mitigation Plan | <input type="checkbox"/> |
| 5 | Hurricane Preparedness Plan | <input type="checkbox"/> |
| 6 | Security system | <input type="checkbox"/> |
| 7 | Fire Fighting system | <input type="checkbox"/> |
| 8 | Other relevant documents, as required by proper authorities | <input type="checkbox"/> |

Send the duly filled Application Form to energyandutilities@gov.tc.

Prepared by:

Click or tap here to enter text.

Name and Signature of Applicant

Date: Click or tap here to enter text.

Inspected by (Only authorized Officer/s can inspect):

Click or tap here to enter text.

Name & Signature of Authorized Officer

Date: Click or tap here to enter text.

Recommendation:

(submit list of members of the Inspecting Team)

- Approval recommended Conditional approval, see conditions under separate sheet
 Denied/disapproved

Comments/Remarks: Click or tap here to enter text.

Click or tap here to enter text.

Name & Signature of Authorized Officer

Date: Click or tap to enter a date.