

Application Form for Reassessment of Chemical Oxygen Demand (COD) under the Trade Effluent Surcharge Scheme

Account No.	#:		
We, the undersigned, have appropriatory) to apply for revision of vised COD values are not transfer the appointed laboratory should be	of Trade Effluent Surch rable if there is a change	narge for the premises. We in the registered consumer,	understand th
Registered Consumer (R.C.)	<u>:</u>	Chop	o of
Signature of R.C. representative [®]	<u>:</u>	Date :	
Name of R.C. representative [@]	<u>:</u>	Post :	
Name of establishment*	:		
Address	:		
# or Water account number(s) if @ if registered in the name of a		t number	

Form DSD/TES 1(e) Nov 2016

Statement of Purpose

- 1. The data you / your appointed HOKLAS laboratory provided is voluntary. If you / your appointed HOKLAS laboratory do not provide sufficient information, DSD may not be able to process your application.
- 2. The data you / your appointed HOKLAS laboratory provided may be disclosed to other Government departments for law enforcement purposes.
- 3. You have a right of access and correction with respect to personal data as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data. A fee may be imposed for complying with a data access request.
- 4. Any person who offers any advantage to a public servant due to this application shall be guilty of an offence. If any person solicits or accepts any advantage due to this application, please contact ICAC. (Phone no.: 25266366)
- 5. Any person who, in an application or in an attachment to an application, furnishes or supplies with intent to deceive any false or misleading information commits an offence.
- 6. DSD can request any further information as and when necessary in processing this application.

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