

Document Number	Decommissioning Safety Permit Application Form	Version Number:
CER/13/173		DRAFT

GUIDANCE ON COMPLETING THIS APPLICATION FORM

1. The Application Form and associated documentation/electronic files should be sent to:

Petroleum Safety Framework Manager
 Commission for Energy Regulation,
 The Exchange,
 Belgard Square North,
 Tallaght,
 Dublin 24.
2. All questions in the Application Form must be answered. If any question is considered 'not applicable' this should be stated in full. The use of the abbreviations (e.g., N.A. or dash) should be avoided.
3. The Sworn Declaration on page 12 must be signed by a person duly authorised by the Applicant(s) to do so. In respect of an Irish company, the seal of the company should be affixed to the Application Form.
4. The following documentation should be submitted with the hard copy Application Form:
 - One signed original and eight hard copies of the Decommissioning Safety Case. The original signed document should be signed by a person duly authorised by the Applicant(s) to do so. In respect of an Irish company, the seal of the company should be affixed.
5. Three CD/DVD ROM copies of:
 - a. the Application Form; and
 - b. application safety case in PDF format.

Maps/Drawings should be submitted in PDF format only and should be included in the relevant attachment file in the same sequence as the hard copy. The CD/DVD-ROM disk and case must be labelled with the date of submission and the details set out in section A.2 of this Application Form.
6. The applicable Safety Case Fee, as specified in the Safety Case Fees Decision Paper, should be paid by electronic funds transfer to the account specified in part E of this paper within 2 working days of the submission of the application.

A. Applicant Details

A.1 Individual Applicant Details

The following contacts details should be provided for each Applicant (use a continuation sheet if necessary):

Name:	
Address:	
Tel	
Fax	
Email	
Contact Person	

Name:	
Address:	
Tel	
Fax	
Email	
Contact Person	

Name:	
Address:	
Tel	
Fax	
Email	
Contact Person	

A.2 Lead Applicant

Where the application is submitted by a petroleum undertaking on behalf of more than one Applicant, please specify a contact person in respect of the application:

Name:	
Address:	
Tel	
Fax	
Email	
Point of Contact	

Where the Lead Applicant is submitting the application on behalf of more than one Applicant, please provide a resolution of the board of the petroleum undertaking and / or such other documents as may be required to demonstrate the authority of the Applicant(s) to submit the Application and to provide the requisite declarations / confirmations (use a continuation sheet if necessary).

Details of authority for submission of application

A.3 Related Applications

Where separate applications have been or will be made by other petroleum undertakings authorised under the petroleum authorisations detailed in section A.4 below, please provide details of such related applications and the applicants in respect of such applications (use a continuation sheet if necessary).

Name:	
Address:	
Tel	
Fax	
Email	
Petroleum Authorisation ID (if any):	
Petroleum Authorisation Type:	
CER Application Reference:	
Point of Contact:	

A.4 Petroleum Authorisation(s)

Please complete for all petroleum authorisations relevant to the designated petroleum activities to be undertaken pursuant to the safety permit sought (use a continuation sheet if necessary):

Petroleum Authorisation ID (if any)		
Petroleum Authorisation Type	Petroleum Lease	
	Consent under s 5 of the 1968 Act ¹	
	Consent under s 40 of the 1976 Act ²	
Geographic Location	Basin	
	Quadrant	
	Block	
Commencement Date of Petroleum Authorisation		
End Date of Petroleum Authorisation		
Petroleum Undertakings in respect of the Petroleum Authorisation		
Named Operator on Petroleum Authorisation		

Petroleum Authorisation ID (if any)		
Petroleum Authorisation Type	Petroleum Lease	
	Consent under s 5 of the 1968 Act ³	
	Consent under s 40 of the 1976 Act ⁴	
Geographic Location	Basin	
	Quadrant	
	Block	
Commencement Date of Petroleum Authorisation		
End Date of Petroleum Authorisation		
Petroleum Undertakings in respect of the Petroleum Authorisation		
Named Operator on Petroleum Authorisation		

¹ Continental Shelf Act, 1968

² Gas Act, 1976

³ Continental Shelf Act, 1968

⁴ Gas Act, 1976

B. Details on Relevant Safety Case(s) Submitted

Please provide a description of proposed petroleum infrastructure and the activities to be carried out (use a continuation sheet if necessary).

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B.1 Decommissioning Safety Case

1	Can you confirm that the submitted Decommissioning Safety Case is in accordance with the requirements of section 8 of the Safety Case Guidelines? (Please complete table in Section C)															
2	Has the petroleum undertaking submitted details of the Independent Competent Body(s) (ICB(s)), to the CER, who will carry out the Facilities Verification Scheme for the particular Decommissioning activity? <i>If the answer to question 2 is no, a submission of choice of ICB(s) should be made to the CER in accordance with the Compliance Assurance System Guidelines.</i>															
3	If the answer to question 2 above is yes, please outline when such information was submitted and provide the following details on the ICB(s): <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Date & Ref Number of Approval</td> <td></td> </tr> <tr> <td>Name:</td> <td></td> </tr> <tr> <td>Address:</td> <td></td> </tr> <tr> <td>Tel</td> <td></td> </tr> <tr> <td>Fax</td> <td></td> </tr> <tr> <td>Email</td> <td></td> </tr> <tr> <td>Point of Contact</td> <td></td> </tr> </table>	Date & Ref Number of Approval		Name:		Address:		Tel		Fax		Email		Point of Contact		
Date & Ref Number of Approval																
Name:																
Address:																
Tel																
Fax																
Email																
Point of Contact																
4	Has the petroleum undertaking previously submitted, and subsequently withdrawn, a Decommissioning Safety Permit related to the Designated Petroleum Activities the subject of this application? <i>Where the answer to question 4 above is Yes, the petroleum undertaking must complete the Statement of Differences in Section B.2 outlining any changes made from the withdrawn application.</i>															

B.2 Statement of Differences from previously approved safety case

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B.3 Related Safety Permit Applications

Please complete for all related safety permit applications relevant to the designated petroleum activities to be undertaken pursuant to the safety permit sought (use a continuation sheet if necessary). They may include Material Change Applications associated with this application for previously approved safety cases.

1	Has this Safety Permit Application been submitted in parallel with another related Safety Permit application?	
2	With respect to the related Safety Permit Application please provide the following	
	Type of Application:	
	Date of Submission to CER:	
	Ref Number of Safety Permit Application:	
	Petroleum Authorisation associated with the Safety Permit	

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C. Decommissioning Safety Case Contents Check

		Yes/No	Safety Case Section Cross Reference
A. Prescriptive Requirements			
3.1	Does the safety case describe how <i>prevention</i> requirements are met?		
3.2	Does the safety case describe how <i>control and detection of Major Accident Hazards</i> are achieved?		
3.3	Does the safety case describe how the <i>Emergency Response</i> requirements are met?		
B. Contents of a Decommissioning Safety Case			
4.2, 8.1 & 8.2	Does the safety case have a description of the safety case's purpose and scope? Including:		
4.2.2	Associated Safety Cases		
4.2.3	Roles and Identities of Third Party Organisations		
4.2.4	Safety Case Structures Alignment with Guidelines		
4.3	Does the safety case have a detailed description of the Petroleum Infrastructure? Including:		
4.3.1 & 8.3.1	Position and Layout		
4.3.2	Location Specific Conditions		
4.3.3	Hazardous Inventories		
8.3.4	Petroleum Infrastructure Connected to the facility		
4.3.6 & 8.3.5	Persons Affected		
8.3.6	Operations		
5.3	Well and Reservoir		
4.4	Does the safety case have a description of its ALARP Demonstration? Including:		
4.4.1	Methodology		
4.4.2	Hazard and Risk Reduction Identification		
4.4.3	Good Practice		
4.4.4	Assessment of Risk against Risk Tolerability Limits		
4.4.5	Quantitative Risk Assessment		

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4.4.6	ALARP Assessment		
4.4.7	General Duty		
4.5 & 8.5	Does the safety case describe the identification, design and operation of Safety Critical Elements? Including:		
4.5.2	Identification of Safety Critical Elements		
4.5.3	Performance Standards		
4.5.4	Assurance		
4.5.5	Verification		
4.5.6	Well Examination		
4.6 & 8.6	Does the safety case have a description of the Safety Management System to be used when in operation? Including:		
4.6.2	Policy		
4.6.3	Planning		
4.6.4	Implementation and Operation		
4.6.5	Checking		
4.6.6	Review		
4.7	Does the safety case have a description of the Emergency Response Organisation, Plans and Procedures?		

Please provide clarification of “No” responses to the above information:

D. Disclosure of Information

On behalf of the Applicant(s) I hereby irrevocably authorise the Commission for Energy Regulation or its staff, agents or subcontractors to disclose all or any of the material submitted as part of this Safety Permit Application to such bodies or persons as the Commission may, in its absolute discretion, consider necessary or desirable in order to assess the Safety Case. I hereby confirm that I have been authorised by all Applicant(s) to permit the disclosure of information in the Safety Case envisaged by this Section C.

Director

Date:

*Note: Where the application is made on behalf of more than one Applicant and a disclosed agent is **not** used, individual confirmations should be provided for each Applicant*

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E. Administrative Requirements

1	Have all questions in the Application Form been answered?	
2	Has the Sworn Declaration being signed by a duly authorised signatory (and sealed where relevant).	
3	Have each of the documentation and electronic files requirements relating to the application being met as follows:	
	a. One signed original and eight hard copies of the Decommissioning Safety Case;	
	b. One signed original copy of this application form;	
	c. An electronic version of the Application Form and application safety case, in PDF format on 3 CD/DVD-RoM.	
	d. The CD/DVD-ROM disk and case must be labelled with the date of submission and the details set out in section A1 of this Application Form	
4	Please state the Safety Case Fee amount to be paid with the application	
5	Please confirm that the Safety Case Fee amount will be paid to the CER within 2 working days of submission of the application	
6	Disclosure consent provided for (or on behalf of each Applicant)	

Safety Case Fee Payment Details

For information on how to pay the Safety Case Fee please contact Elaine Wallace at ewallace@cer.ie

F. SWORN DECLARATION

I [], being a director of ● having company registration number ● and having its registered office at ● , **HEREBY CONFIRM AND DECLARE:**

1. that I am authorised to make this declaration on behalf of [*the Applicant(s)*]
2. that the information provided in this application (and in all supporting document) is true, complete, accurate and not misleading in all respects.

Signed by:

[Insert name in block capitals]

For and on behalf of:

At:

On:

In the presence of:

Witness Signature:

Witness Name:

Witness Occupation:

Witness Address:

*Note: Where the application is made on behalf of more than one Applicant, and a disclosed agent is **not** used, individual sworn declarations should be provided for each Applicant*