# Questionnaire – Members of the public, professional users and associations, and licence-holders.

We would welcome responses to the following questions set out in this consultation paper.

**Q1. Do you acquire, import, possess or use any currently regulated explosives precursors listed on pages 4 and 5 of this consultation document? Please tick all that apply:**

| **Acquire** | **Import** | **Possess** | **Use** | **Don’t know** | **None of these** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

**Q2. Do you plan to acquire, import, possess or use any regulated explosives precursors in the next 3 years? Please tick all that apply**

| **Acquire** | **Import** | **Possess** | **Use** | **Don’t know** | **None of these** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

**Q3. Which regulated explosives precursors do you already or intend to acquire, import, possess or use, at what concentration and for what purpose?**

| **Regulated explosives precursor** | **I currently acquire, possess, import or use (Y/N)** | **I plan to acquire, possess, import or use in the next three years (Y/N)** | **Concentration (%w/w)** | **Purpose** |
| --- | --- | --- | --- | --- |
| Hydrogen peroxide |  |  |  |  |
| Nitric acid |  |  |  |  |
| Sulfuric acid |  |  |  |  |
| Nitromethane |  |  |  |  |
| Potassium chlorate |  |  |  |  |
| Potassium perchlorate |  |  |  |  |
| Sodium chlorate |  |  |  |  |
| Sodium perchlorate |  |  |  |  |

**Q4. Could you continue with your activity if you could no longer acquire, import, possess or use the regulated explosive precursors you have indicated above?**

| **Regulated explosive precursor** | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q5. Please give details of why you could not continue your activity if you could no longer acquire, import, possess, or use the regulated explosive precursors you have indicated above.**

**Q6. Could you use an alternative substance or lower concentration to continue your activity?**

| **Regulated explosive precursor** | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q7. Please give details, i.e. the name and concentration of the alternative substance or the lower concentration of the current substance.**

**Q8. Does the alternative substance or lower concentration cost more or less than the substance or concentration you use or intend to use?**

| **Regulated explosive precursor** | **More** | **Less** | **Don’t know** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q9. If the alternative substance or lower concentration costs more, to what extent would this impact your ability to continue engaging in the activity you use it/plan to use it for?**

| **Regulated explosive precursor** | **I would no longer be able to continue the activity** | **It would severely limit my ability to continue the activity** | **It would slightly limit my ability to continue the activity** | **It would not limit me** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Q10. Do you acquire, import, possess or use any of the proposed regulated explosives precursors outlined on page 7? (Phosphoric Acid, Hydrochloric Acid, Hexamine)**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q11. Do you plan to acquire, import, possess or use any of the proposed regulated explosives precursors in the next 3 years?**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q12. If the answer to Q10 Or Q11 is yes, which proposed regulated explosives precursors do you already or intend to acquire, import, possess or use, at what concentration and for what purpose?**

| **Proposed regulated explosives precursor (Option 3)** | **I acquire, possess, import or use now (Y/N)** | **I plan to acquire, possess, import or use (Y/N)** | **Concentration (%w/w)** | **Purpose** |
| --- | --- | --- | --- | --- |
| Phosphoric acid |  |  |  |  |
| Hydrochloric acid |  |  |  |  |
| Hexamine |  |  |  |  |

**Q13. Could you continue with your activity if you could no longer acquire, import, possess or use the proposed regulated explosive precursor?**

| **Proposed regulated explosives precursor** | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q15. Could you use an alternative substance or lower concentration to continue your activity?**

| **Proposed regulated explosives precursor** | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q16. Please give details, i.e. the name and concentration of the alternative substance, or the lower concentration of the current substance**

**Q17. Does the alternative substance or lower concentration cost more or less than the substance or concentration you use or intend to use?**

| **Proposed regulated explosives precursor** | **More** | **Less** | **Don’t know** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q18. If the alternative substance or lower concentration costs more, to what extent would this impact your ability to continue engaging in the activity you use it/plan to use it for?**

| **Proposed regulated explosive precursor** | **I would no longer be able to continue the activity** | **It would severely limit my ability to continue the activity** | **It would slightly limit my ability to continue the activity** | **It would not limit me** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Q19. If there is no alternative substance or lower concentration which you can use as a replacement for the proposed regulated explosive precursor you currently use (phosphoric acid, hydrochloric acid, hexamine), to what extent will this impact your ability to continue engaging in the activity you use it/plan to use it for?**

| **Proposed regulated explosive precursor** | **I would no longer be able to continue the activity** | **It would severely limit my ability to continue the activity** | **It would slightly limit my ability to continue the activity** | **It would not limit me** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Q20. If there is no alternative substance to the proposed regulated explosive precursor that you use, how will no longer being able to complete your activity impact on you? Please indicate all that will apply.**

| **Proposed regulated explosive precursor** | **If I am unable to continue my activity, I will be negatively impacted emotionally** | **If I am unable to continue my activity, I will be negatively impacted financially** | **If I am unable to continue my activity, my time will be negatively impacted** | **I will not be negatively impacted** | **Other (please write below)** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Q21. Please provide further details, e.g. I will be negatively impacted financially because I will have to pay for a professional to complete a service I would normally complete at home.**

**Q22. Do you acquire, import, possess or use any of the proposed regulated poisons outlined on page 7?**

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** | **Don’t know** |
|  |  |  |

**Q23. Do you plan to acquire, import, possess or use any of the proposed regulated poisons in the next 3 years?**

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** | **Don’t know** |
|  |  |  |

**Q24. If the answer to Q10 Or Q11 is yes, which proposed regulated poisons do you already or intend to acquire, import, possess or use, at what concentration and for what purpose?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Proposed regulated poison** | **I acquire, possess, import or use now (Y/N)** | **I plan to acquire, possess, import or use (Y/N)** | **Concentration (%w/w)** | **Purpose** |
| Aluminium Sulphide |  |  |  |  |
| Sodium Sulphide |  |  |  |  |
| Calcium Sulphide |  |  |  |  |
| Magnesium Sulphide |  |  |  |  |
| Zinc Phosphide |  |  |  |  |
| Calcium Phosphide |  |  |  |  |
| Arsenic and mercury compounds |  |  |  |  |
| 2,4 – Dinitrophenol and derivatives including sodium dinitrophenolate |  |  |  |  |

**Q25. Could you continue with your activity if you could no longer acquire, import, possess or use the proposed regulated poison?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposed regulated poison** | **Yes** | **No** | **Don’t know** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q26. Could you use an alternative substance or lower concentration to continue your activity?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposed regulated poison** | **Yes** | **No** | **Don’t know** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q27. Please give details, i.e. the name and concentration of the alternative substance, or the lower concentration of the current substance**

**Q.28 Does the alternative substance or lower concentration cost more or less than the substance or concentration you use or intend to use?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposed regulated poison** | **More** | **Less** | **Don’t know** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q29. If the alternative substance or lower concentration costs more, to what extent would this impact your ability to continue engaging in the activity you use it/plan to use it for?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Proposed regulated poison** | **I would no longer be able to continue the activity** | **It would severely limit my ability to continue the activity** | **It would slightly limit my ability to continue the activity** | **It would not limit me** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Q30. Would adding 2, 4 Dinitrophenol and derivatives including sodium dinitrophenolate to the Poisons Act as a regulated Poison have an impact on you?**

| **Positive Impact** | **No Impact** | **Negative Impact** |
| --- | --- | --- |
|  |  |  |

**Q31. Please provide details**

**Q32.To what extent do you agree or disagree that the benefits of the options described on page 3 in terms of regulation and security outweigh the limitations it places on you as a member of the public?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Neither agree nor disagree** | **Disagree** | **Strongly disagree** |
| **Option 1** |  |  |  |  |  |
| **Option 2** |  |  |  |  |  |
| **Option 3** |  |  |  |  |  |

**Q.33 Please provide any other detail you would like us to consider that has not been covered by the questions above.**

**Thank you for participating in this consultation.**

# Questionnaire – Suppliers, manufacturers, and online marketplaces

We would welcome responses to the following questions set out in this consultation paper.

**Q1. Do you sell any regulated explosives precursors to members of the public?**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q2. Do you sell any regulated explosives precursors or poisons to professional users or other suppliers?**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q3. If the answer to Q1 or Q2 is yes, which regulated explosives precursors do you sell, at what concentration and for what purpose?**

| **Explosives precursor** | **I sell to members of the public (Y/N)** | **I sell to professional users and other suppliers (Y/N)** | **Concentration (%w/w)** | **Purposes** |
| --- | --- | --- | --- | --- |
| Hydrogen peroxide |  |  |  |  |
| Nitric acid |  |  |  |  |
| Sulfuric acid |  |  |  |  |
| Nitromethane |  |  |  |  |
| Potassium chlorate |  |  |  |  |
| Potassium perchlorate |  |  |  |  |
| Sodium chlorate |  |  |  |  |
| Sodium perchlorate |  |  |  |  |
| None |  |  |  |  |

**Q4. If the answer to Q2 is yes, which regulated poisons do you sell, and for what purposes?**

|  |  |  |
| --- | --- | --- |
| **Poison** | **I sell to professional users and other suppliers (Y/N)** | **Purposes** |
| Aluminium phosphide |  |  |
| Arsenic; its compounds |  |  |
| Barium, salts of, |  |  |
| Bromomethane |  |  |
| Chloropicrin |  |  |
| Fluoroacetic acid; its salts; fluoracetamide |  |  |
| Hydrogen cyanide; metal cyanides, other than ferrocyanides and ferricyanides |  |  |
| Lead acetates; compound of lead with acids from fixed oils |  |  |
| Magnesium phosphide |  |  |
| Mercury, compounds of, the following: - Nitrates of mercury ; mercuric cyanide oxides; mercuric thiocyanate; ammonium mercuric chlorides; potassium mercuric iodides; organic compounds of mercury which contain a methyl group directly linked to the mercury atom |  |  |
| Oxalic acid |  |  |
| Phenols (phenol; phenolic isomers of the following cresols, xylenols, monoethylphenols) except in substances containing less than 60% weight in weight of phenols; compounds of phenols with metal, except in substances containing less than the equivalent of 60% weight in weight, of phenols |  |  |
| Phosphorus yellow |  |  |
| Strychnine; its salts in quaternary compounds |  |  |
| Thallium, salts of |  |  |
| None |  |  |

**Q5. Do you sell any of the proposed regulated explosives precursors or poisons to members of the public?**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q6. Do you sell any of the proposed regulated explosives precursors or poisons detailed on pages 6 and 7 to professional users or other suppliers?**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q7. If the answer to Q5 or Q6 is yes, which proposed regulated explosives precursors do you sell, at what concentration and for what purpose?**

| **Explosives precursor** | **I sell to members of the public (Y/N)** | **I sell to professional users and other suppliers (Y/N)** | **Concentration (%w/w)** | **Purposes** |
| --- | --- | --- | --- | --- |
| Phosphoric acid |  |  |  |  |
| Hydrochloric acid |  |  |  |  |
| Hexamine |  |  |  |  |
| Ammonium nitrate |  |  |  |  |

**Q8. If the answer to Q6 is yes, which proposed regulated poisons do you sell, and for what purposes?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Poison** | **I sell to members of the public (Y/N)** | **I sell to professional users and other suppliers (Y/N)** | **Purposes** |
| Aluminium sulphide |  |  |  |
| Sodium sulphide |  |  |  |
| Calcium sulphide |  |  |  |
| Magnesium sulphide |  |  |  |
| Zinc phosphide |  |  |  |
| Calcium phosphide |  |  |  |
| 2,4 Dinitrophenol |  |  |  |

**Q9. Under option 3, it will be illegal to sell the proposed regulated precursors in concentrations above the specified limits to members of the public without an Explosives Precursors and Poisons (EPP) licence.**

**If you currently sell or manufacture products containing these precursors, will you need to reformulate in order to continue to sell to the general public?**

| **Explosives precursor** | **I will need to reformulate products containing this precursor to sell to those without an EPP licence** | **I will not need to reformulate, as my products do not exceed the concentration thresholds in option 3** | **I will not need to reformulate, I will only sell to those with an EPP licence** | **I will not need to reformulate, I will stop selling these products entirely** |
| --- | --- | --- | --- | --- |
| Phosphoric acid |  |  |  |  |
| Hydrochloric acid |  |  |  |  |
| Hexamine |  |  |  |  |
| Ammonium nitrate |  |  |  |  |

**Q10. If you need to reformulate your products to contain lower concentrations of the proposed explosive precursors, do you think this will be:**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

| **Expensive** | **Cheap** | **No extra cost** |
| --- | --- | --- |
|  |  |  |

**Q11. Please give details, e.g. anticipated costs or difficulties involved in reformulating.**

**Q12. If you need to reformulate your products to contain lower concentrations of the proposed explosive precursors, what impact do you think this will have on the consumer?**

| **Large positive impact** | **Moderate positive impact** | **No impact** | **Moderate negative impact** | **Large negative impact** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Q13. Please give further details, e.g. consumers will not be impacted as an effective alternative exists, or, consumers will be negatively impacted as alternatives are not as effective.**

**Q14. Under option 3, it will be illegal to sell the proposed regulated poisons to members of the public without an Explosives Precursors and Poisons (EPP) licence. The proposed regulated poisons will also only be able to sold only sold by a registered pharmacist**

**If you currently sell or manufacture products containing these poisons, will you need to reformulate in order to continue to sell to the general public?**

| **Poison** | **I will need to reformulate products containing this poison to sell to those without an EPP licence** | **I will not need to reformulate, I will only sell to those with an EPP licence** | **I will not need to reformulate, I will stop selling these products entirely** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Q15. If you need to reformulate your products to exclude any of the proposed poisons, do you think this will be:**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

| **Expensive** | **Cheap** | **No extra cost** |
| --- | --- | --- |
|  |  |  |

**Q16. Please give details, e.g. anticipated costs or difficulties involved in reformulating.**

**Q17. If you need to reformulate your products to no longer contain any of the proposed poisons, what impact do you think this will have on the consumer?**

| **Large positive impact** | **Moderate positive impact** | **No impact** | **Moderate negative impact** | **Large negative impact** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Q18. Please give further details, e.g. consumers will not be impacted as an effective alternative exists, or, consumers will be negatively impacted as alternatives are not as effective.**

**Q19. Verifying customers and registering transaction details for sales of regulated substances may involve additional costs, e.g. one-off costs for updating processes and IT systems, training staff, costs of admin/staff time in verifying and registering details of each sale.**

**Do you think that verifying the customer and registering transaction details for sales of regulated substances will be:**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

| **Expensive** | **Cheap** | **No extra cost** |
| --- | --- | --- |
|  |  |  |

**Q20. Please give details, e.g. your anticipated costs (actual figures, or as a percentage of FTE or current admin costs), any additional costs or difficulties that we have not anticipated above.**

**Q21. What do you think is a suitable routine frequency for verifying repeat customers who are professional users or other suppliers unless there has been a significant change from previous transactions?**

| **Every transaction** | **2 or 3 times a year** | **Once a year** | **Only once** | **Never** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Q22. Please give details, e.g. why you believe that frequency will be suitable.**

**Q23. Do you think we should specify within the Poisons Act 1972 how information about products should be shared along the supply chain?**

| **Yes** | **No** | **Don’t know** |
| --- | --- | --- |
|  |  |  |

**Q24. Do you have any suggestions for how this information could be shared between different parts of the supply chain?**

**Q25. Do you think submitting suspicious transactions within 24 hours of noticing the transaction is suspicious will be:**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

| **Expensive** | **Cheap** | **No extra cost** |
| --- | --- | --- |
|  |  |  |

**Q26. How much of an impact will reporting suspicious transactions within 24 hours have on your business? E.g. any anticipated financial impact (one-off costs for updating systems, extra staff time or training time), any other impact to the business.**

**Q27. Will it be possible for you to submit suspicious transaction reports through a gov.uk portal?**

|  |  |  |
| --- | --- | --- |
| Yes | No | Don’t know |
|  |  |  |

**Q28. If your response to Q18 was No, please provide further information as to why using an online portal would not be possible.**

**Q29. Do you think using an online portal to submit suspicious transaction reports will be:**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

| **Expensive** | **Cheap** | **No extra cost** |
| --- | --- | --- |
|  |  |  |

**Q30. Please provide details of what impact using an online portal to report suspicious transactions would have on your business. E.g. financial costs, training costs, any other impact we have not anticipated.**

**Q31. To improve our ability to gather meaningful information from suspicious activity reports, we are considering a requirement for businesses to provide certain relevant identifiable information that is held relating to a suspicious transaction when making a suspicious activity report.**

**For example, if a business routinely collects the name, home address, email address of customers, we would require this information to be provided to us when a suspicious activity report is made.**

**We would not require businesses to collect identifiable information about customers where they do not already do so, and this would not create any obligation for businesses to begin collecting this type of information. We will also be consulting with the Information Commissioners Office on this proposal.**

**Do you think that providing identifiable information (where this is currently held) relating to a suspicious transaction when submitting a suspicious activity report will be:**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

| **Expensive** | **Cheap** | **No extra cost** |
| --- | --- | --- |
|  |  |  |

**Q32. Please provide any further information, e.g. why you think that providing and storing this data will be easy or difficult, and whether this would involve any additional costs or staff time for your business.**

**Q33. We believe that receiving information such as the name, email address and home address relating to a suspicious purchase would improve our ability to investigate suspicious transactions, where action is appropriate.**

**Which of these do you routinely collect when customers purchase explosives precursors and poisons:**

| **Information** | **This information is routinely collected when a sale is made** | **This information is not collected when a sale is made** |
| --- | --- | --- |
| Name of customer |  |  |
| Email address |  |  |
| Home Address |  |  |

**Q34. Is there any other information you routinely collect which you provide to us when making a suspicious transaction report?**

**Q35. If in Q28 you answered that you do collect some or any of the information detailed, do you think that it would be easy or difficult to provide this information as part of a suspicious activity report?**

| **Very easy** | **Easy** | **Don’t know** | **Difficult** | **Very difficult** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Q36. What lead-in time do you think you would require to make any changes required to adhere to the measures in option 3?**

| **6 months or less** | **6 months – 1 year** | **Longer than 1 year** |
| --- | --- | --- |
|  |  |  |

**Q37. Please give details of why this may take the amount of time you have indicated, e.g. changing product concentrations, changing labels, training staff etc.**

**Q38. To what extent do you agree or disagree that the benefits of the options described on page 3 in terms of regulation and security outweigh the limitations it places on you as a business?**

|  | **Strongly agree** | **Agree** | **Neither agree nor disagree** | **Disagree** | **Strongly disagree** |
| --- | --- | --- | --- | --- | --- |
| **Option 1** |  |  |  |  |  |
| **Option 2** |  |  |  |  |  |
| **Option 3** |  |  |  |  |  |

**Q39. Please provide any other detail you would like us to consider that has not been covered by the questions above.**

**Thank you for participating in this consultation.**

# About you

|  |  |
| --- | --- |
| **Full name** |  |
| **Job title** or capacity in which you are responding to this consultation exercise (for example, member of the public) |  |
| **Date** |  |
| **Company name/organisation** (if applicable) |  |
| **Address** |  |
|  |  |
| **Postcode** |  |
| If you would like us to acknowledge receipt of your response, please tick this box | (please tick box) |
| Address to which the acknowledgement should be sent, if different from above |  |
|  |
|  |

**If you are a representative of a group**, please tell us the name of the group and give a summary of the people or organisations that you represent.

|  |
| --- |
|  |
|  |
|  |
|  |