

# Form WRF: Administrative variations to existing licences

Water Resources Act 1991, Environment Act 1995, The Water Resources (Abstraction and Impoundment) Regulations 2006, The Natural Resources Body for Wales (Functions) Order 2012

## 1. Type of variation

Indicate the change(s) you wish to make to your licence(s) here. All applicants must complete Sections 2, 3, 4 and 10, and the relevant Sections specified below.

- |   |                                     |                              |
|---|-------------------------------------|------------------------------|
| To make an administrative change to a licence | <input checked="" type="checkbox"/> | Complete Section 5           |
| To reduce abstraction quantities              | <input type="checkbox"/>            | Complete Section 6           |
| To revoke your licence                        | <input type="checkbox"/>            | Complete Section 7           |
| Apportion (split) a licence                   | <input type="checkbox"/>            | Complete Sections 7, 8 and 9 |
| To transfer Licence Holder                    | <input type="checkbox"/>            | Complete Section 8           |

## 2. The licence(s) you want to change

2.1 Provide the licence serial number(s) which the proposed change relates to

23/66/9/0014

Natural Resources Wales  
Fully Received

28 FEB 2019

2.2 Is this proposal as a result of a Restoring Sustainable Abstraction programme or other work requested by us? No  Yes  If yes, provide details below

2.3 Are you making this application as part of an agreement to trade water rights?

No  Yes  If yes, provide details below and complete Sections 3, 7, 9 and 10

## 3. Current Licence Holder details

Provide details of the current Licence Holder. See Guidance Note WRX for information regarding details required and signatories permissible for organisations.

Title  Full Name TREFRIW WOOLLEN MILLS LTD

Company, Charity or Trading Name TREFRIW WOOLLEN MILLS LTD,

Company or Charity Registration Number 00552259

Registered Address TREFRIW,  
CONWY COUNTY,  
Postcode: LL27 0NQ

Telephone Number Office: 01492 640462  
Mobile:

Email Address elaine@t-w-m.co.uk

**4. Details of individual or agent authorised to act as a point of contact**

This is who we will correspond with unless otherwise informed. If an agent signs on behalf of an applicant, a letter of authorisation from the applicant is required.

Title **MR** Full Name **MORGAN WILLIAMS**

Company, Charity or Trading Name **TREFRIW WOOLLEN MILLS LTD**

Position in Company **DIRECTOR**

Address **TREFRIW  
CONWY COUNTY  
Postcode: LL27 0NQ**

Telephone Number Office: **01492 640462**  
Mobile:

Email Address **elaine@t-w-m.co.uk**

Specify who we should contact with regard to:

- |                                       |           |                          |       |                          |
|---------------------------------------|-----------|--------------------------|-------|--------------------------|
| Operations (on site) contact          | Applicant | <input type="checkbox"/> | Agent | <input type="checkbox"/> |
| Invoice contact                       | Applicant | <input type="checkbox"/> | Agent | <input type="checkbox"/> |
| Abstraction records (returns) contact | Applicant | <input type="checkbox"/> | Agent | <input type="checkbox"/> |

**5. Administrative Change(s)**

Provide details of the administrative change(s) you wish to make and the reasons for this change. Complete one row for each change(s) proposed.

Current licence	Change proposed	Reason for change
23/66/9/0014	REVERT TO SCHEDULE OF CONDITIONS B	PROPOSED NEW TURBINE NOT INSTALLED,
CURRENT LICENCE 23/66/9/0014 B.7 MEANS OF MEASUREMENT OF WATER ABSTRACTED	<del>23/</del> REMAIN CALCULATING WATER ABSTRACTING USING HOURS RUN.	HAVE ALWAYS USED THIS METHOD WHEN COMPLETING OUR RETURNS WITH FORM WR72 (SECTION 4.2)

## 6. Reduction in licensed quantities

6.1 Provide the current and proposed quantities for each abstraction point.

Abstraction National Grid Reference (12 digit)	Maximum annual volume (cubic metres)	Maximum daily volume (cubic metres)	Maximum hourly volume (cubic metres)
	Current: Proposed:	Current: Proposed:	Current: Proposed:
	Current: Proposed:	Current: Proposed:	Current: Proposed:
	Current: Proposed:	Current: Proposed:	Current: Proposed:

6.2 Is this licence aggregated with another? No  Yes

If yes, provide licence serial number.

## 7. Revocation declaration

Please enclose your licence(s) with this application. Tick the statements that apply.

### All licences

I request that the licence(s), whose serial number(s) is/are provided in Section 2, is/are revoked

I accept that any new licence(s) applied for in future may not be granted on the same terms, or at all

### Abstraction licence

I understand that if I want to abstract more than 20 cubic metres per day after the licence is revoked, I must apply for a new licence

### Impoundment licence

I confirm that the works authorised by the licence serial number provided in Section 2 have not been constructed

## 8. Transfer of Licence Holder / apportioning a licence

### Proposed new Licence Holder details

8.1 Specify if you want to transfer the entire licence or apportion some of your licensed quantities to a new Licence Holder.

- Transfer of Licence Holder  Complete this section and Section 10  
Apportion the licence  Complete this section and Sections 9 and 10

8.2 What date do you want the licence to be transferred?

8.3 Provide details of the proposed new Licence Holder below. For additional Licence Holders, please use a separate sheet and tick here to show that you have done this.

Title

Full Name



10. Signatures: current Licence Holder (for all changes), and proposed Licence Holder(s) for Transfers and Apportionments

Existing Licence Holder's signature

Title  Full Name

Position

Signature

Date

Proposed new Licence Holder's signature, if applicable

Title  Full Name

Position

Signature

Date

Additional proposed new Licence Holder's signature, if applicable

Title  Full Name

Position

Signature

Date

Application Checklist

Please tick the following checklist items to indicate that you have included the required information. If any sections of the form are left blank and no supporting information submitted, where we have insufficient information to make a decision on your application, we will return your form to you.

- For transfer of Licence Holder, a map showing the land ownership boundary with all abstraction point(s) clearly marked or the evidence outlined in Guidance Note WRX
- For revocations, a copy of the original licence
- Additional contact details

For Natural Resources Wales' use only:

Date received \_\_\_\_\_ Reference Number \_\_\_\_\_

