

FORM WRA: Applicant details and proposal outline

Application type and fee

Please generate a reference number. It should start with "WR" followed by your organisation or company name and today's date in four-digit format (DDMM) without spaces or punctuation.

Example: WRNATURALRESOURCESWALES1101

Please use this use this number throughout this application. This reference number can also be used for your BACS reference if paying electronically.

WRLLANWEIRREMOVAL

For the application types listed, complete this form and/or the relevant additional forms named below. Tick the type of application you are applying for. Please refer to our Find out if you need a licence web-page for an explanation for the different licence types. If your proposal involves multiple licence types, tick all that apply.

See our Charges for abstraction and impoundment applications web page for details of application fees and how to pay.

Removal of an existing impoundment. Also complete form WRE.

Please indicate how you wish to pay your application fee. If paying by BACS, please quote the reference number created in question 1 when setting up the bank transfer.

If paying by cheque, please ensure you add the six digit cheque number below.

BACS

Please add your BACS reference below

WRLLANWEIRREMOVAL

Applicant details

Applicant type

Charity

Applicant details

Full Name	Harriet Rose Alvis
Company, Charity or Trading Name	West Wales Rivers Trust
Company or Charity Registration Number	1105663

Applicant Registered Address

Line 1 Llys Afon
Line 2 Hawthorn Rise
Line 3 Haverfordwest
Line 4 Pembrokeshire
Postcode SA61 2BQ

Applicant Contact details

Office Telephone Number 07518662884
Mobile Telephone Number 07518662884
Email Address harriet@westwalesrivertrust.org

Please indicate who we should contact regarding operation of your site, this should be the person responsible for the day to day running of the operation.

	Applicant	Agent
Site operations contact	X	

For applications for abstraction licences, please also specify who we should contact for invoices and abstraction records (returns).
Not necessary for temporary or transfer licence applications.

	Applicant	Agent
Invoice address	X	
Abstraction records contact		

Details of agent or individual authorised to act as application contact

Use applicant contact details

Yes

Entitlement to apply (not required for impoundment licence applications)

Does the applicant have a legal right of access to the point of abstraction?

Not applicable (Impoundment application)

Site map showing abstraction points

- File: Penllergare weirs - locations.png - [Download](#)

Other supporting documents

- File: Penllergare weirs - Supporting information.pdf - [Download](#)

Pre-application number

Have you undertaken a pre-application enquiry or had any previous discussions with us?

Yes

Provide reference number or staff member's name

Dave Charlesworth

Remediation work

Is this proposal as a result of a Restoring Sustainable Abstraction programme or other work requested by us?

No

Source of supply

State where you intend to abstract from

Not applicable (Impoundment application)

Provide a 12 digit National Grid Reference for the proposed or existing abstraction or impoundment point (e.g. ST 19057 76826)

SS 62466 97683

Source of supply (name of watercourse or aquifer)

Afon Llan

Site name / reference
(e.g. Tŷ Mawr Farm)

Penllergare

Proposal summary

Please provide an outline of your proposal, including any sketches.

As a guide, you should include: a description of the activities which (will) take place at your site, the means of abstraction/impoundment proposed, if the proposal is related to another licence or permit (i.e. an Environmental Permit to Discharge Water) and details of any survey work undertaken. For changes to existing licences, summarise the changes proposed. Sketches or photographs that will aid our understanding of your proposal can be uploaded below.

See attached proposal

Summary of proposal

- File: Penllergare weirs - Supporting information.pdf - [Download](#)

Declaration

By signing below, you are declaring that, to the best of your knowledge; the information given in this form, on any map and in any supporting or additional information; is true.

Signed HRAIvis

Print name Harriet Alvis

Position CEO

Date

* 28/02/2023

Would you like a copy of your submission?

Yes

Your email address

harriet@westwalesrivertrust.org