

FORM WRA: Applicant details and proposal outline

Water Resources Act 1991 (as amended by the Water Act 2003),
Environment Act 1995, The Water Resources (Abstraction and Impounding)
Regulations 2006, The Natural Resources Body for Wales (Functions) Order 2012



Cyfoeth
Naturiol
Cymru
Natural
Resources
Wales

Natural Resources Wales
Fully Received

11 SEP 2019

1. Application type and fee

For the application types listed, complete this form and/or the relevant additional forms named below. Please tick which forms have been included with your application. Forms should be completed with reference to Guidance Note WRX.

- | | |
|---|--|
| * Pre-application enquiry (non-hydropower) | <input type="checkbox"/> Only complete this form |
| * Pre-application enquiry (hydropower) | <input type="checkbox"/> Also complete form WRB |
| * Application for a Groundwater Investigation Consent | <input type="checkbox"/> Only complete form WRC |
| New full abstraction licence | <input checked="" type="checkbox"/> Also complete form WRD |
| New temporary abstraction licence | <input type="checkbox"/> Also complete form WRD |
| New licence to transfer water | <input type="checkbox"/> Also complete form WRD |
| New impoundment licence | <input type="checkbox"/> Also complete form WRE |
| Renewal of a time-limited licence | <input type="checkbox"/> Also complete form WRD |
| Removal of an existing impoundment | <input type="checkbox"/> Also complete form WRE |
| Technical variation of an abstraction licence | <input type="checkbox"/> Also complete form WRD |
| Technical variation of an impoundment licence | <input type="checkbox"/> Also complete form WRE |
| * Administrative variations to existing licences | <input type="checkbox"/> Only complete form WRF |
| * No fee required | |

Please indicate how you wish to pay your application fee and provide a reference number where relevant.

Cheque ☒ BACS ☐ Credit or debit card ☐

Your reference number

2. Applicant details

This is who the licence would be issued to and must be a legal entity such as an individual, registered company, charity or public body. If you are an agent acting on behalf of an applicant, provide their details here and yours in Section 3. See Guidance Note WRX for clarification of the details required and signatories permissible for organisations.

Applicant type:

- | | | | |
|--------------------------------------|--|----------------------------------|---|
| Individual <input type="checkbox"/> | Limited company <input type="checkbox"/> | Charity <input type="checkbox"/> | Corporate body <input type="checkbox"/> |
| Partnership <input type="checkbox"/> | Sole trader <input type="checkbox"/> | Club <input type="checkbox"/> | Other <input type="checkbox"/> |
- If other, please specify

Title

Full Name

Company, Charity or
Trading Name

Company or Charity
Registration Number

Registered Address

Office: 01559 363209
Mobile: 07900570440

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Cardiff

FORM WRA

Email Address

Page 2 of 4

5. Application reference number

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

No ☐ Yes ☒ Provide reference
number or staff
member's name

WIRS 1805899
ANNA FRACCHIOLLA

6. Remediation work

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

No ☒ Yes ☐ If yes, provide your
licence number

7. Source of supply

7.1 State where you intend to abstract from

Surface Water ☒ Groundwater ☐

Give Groundwater Investigation Consent number
if applicable

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

SN

41894

40287

7.3 Source of supply or location of
proposed impoundment

RIVER TEIFI

7.4 Site name / reference

LLANDYSUL PADDLERS CANOE CENTRE
TRAINING LAKE

8. Proposal summary

Please provide an outline of your proposal as described in Guidance Note WRX, including any sketches. If you are submitting a pre-application enquiry, this must include the quantities of water you propose to abstract. If necessary continue on a separate sheet and tick here to show that you have done this. ☐

We are applying for an abstraction license for our canoe training lake.

The lake is not lined and does not retain water for long periods of time and requires a regular supply of water. There are two 12" pipes set at a low gradient that fill the lake when the river is high enough to reach the pipes. This keeps the lake healthy for wildlife and users of the lake.

There is a small spillway area for the water to escape if the lake gets too high.

We estimate that the pipes would extract approximately 60 cubic metres per day depending on the height of the river. During the summer months this would be less due to low river levels.

We have included a map of the area, the point marked in red is where the pipes abstract the water from the river.

The land we own is highlighted in orange.

9. Declaration

Please see Guidance Note WRX for details of who can sign this section and note the information in that document relating to the Data Protection Act 1998.

By signing below, you are declaring that as far as you know and believe the information given in this form, on any map and in any supporting or additional information, is true.

Signed

Alix Bryant

Print name

ALIX BRYANT

Position

COMPANY SECRETARY

Date

10/09/2019

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 application to you.

Essential:

Letter of authorisation from the applicant, allowing the agent to act as signatory ☐

Map showing the land ownership boundary with all abstraction and discharge point(s) clearly marked ☒

Where relevant:

Evidence of negotiations of expected access rights, if applicable ☐

For groundwater abstractions, results of pump test (if not previously submitted) ☐

For Natural Resources Wales' use only:

Date received _____

Reference Number _____

Payment received Yes ☐
No ☐

Amount received _____
Not required ☐