

Apply to deploy a mobile plant permit for treating waste to produce soil, soil substitutes and aggregates

Permit and contact details

Permit number under which this deployment is taking place

EPR/LB3106LZ

Contact details for this deployment

(This could be the operator or a person acting on behalf of the operator such as a consultant.)

Customer number (if applicable) -

Full name	David Slater
Organisation	Envirotrat Solutions Limited
Position	Director
Address	Brook House Moss Grove Kingswinford
Postcode	DY6 9HS
Email address	david.slater@envirotrat.com
Contact phone number	07949 205896

Technically competent manager

This is the person who will be responsible for compliance with the permit for this deployment. See the guidance notes for further details.

Title	Mrs
First name	Helen
Last name	Davies-Pye
Telephone - mobile	07710 996676
Telephone - office	07710 996676
Email address	helen.davies-pye@hdpenvironmental.co.uk

Nominated competent person

Provide details of the NCP who will be the main contact for the deployment and who will report to the TCM. See the guidance notes for further details.

Title	Mr
First name	David
Last name	Slater
Telephone - mobile	07949 205896
Telephone - office	07949 205896
Email address	david.slater@envirotreat.com

About the land where the waste operation will be carried out

General address:

Address	New inn Fire Station New Road Pontypool
Postcode	NP4 0YW
12-figure grid reference	ST2973499444

You must provide a location map outlining the area of land where the treatment will take place.

See the form guidance for information on what needs to be included in the location map

- File: CM852 - New Inn Fire Station, Pontypool - A-039002.pdf - [Download](#)

Occupancy details

Are you the occupier of the land?

No

If no, please give the details of the land owner or main occupier (e.g. tenant)

Name Mike Davies
Organisation South Wales Fire and Rescue Service
Position -
Address Business Park, CF72 8LX
Forest View, Llantrisant
Ynysmaerdy, Pontyclun
Postcode CF72 8LX
Phone number 01443 232000
Email address m4-davies@southwales-fire.gov.uk

Do you have the occupant's consent to carry out the activity?

Yes

Deployment details

Is the site within 500m of a European Site, Ramsar or Site of Special Scientific Interest (SSSI)?

No - I am using the generic risk assessment for SR2010No11

Is the site within a groundwater source protection zone (SPZ) 1 or 2?

No - I am using the generic risk assessment for SR2010No11

Payment

How do you want to pay for your application fee?

Credit or debit card

Supporting documents

Please upload the following: Location map (required for all deployments) Site specific risk assessment (required for all deployments within 500 metres of a European Site, Ramsar or SSSI or within a SPZ 1 or 2)

- File: MTL-EPR_LB_3106LZ - New Inn Fire Station - Deployment Form Supplementary Information.pdf - [Download](#)

Declaration

Are you signing the form on behalf of a relevant person?

If you are not a relevant person, but want to sign the application on their behalf, you must include confirmation that you can do this.

No

Does your deployment application relate to a standard facility permit?

If your deployment application is being made in relation to a standard facility permit (SRP), you also need to confirm that you are able to meet all relevant criteria of the standard rule set/sets under which you are applying.

I confirm that my activity/activities will fully meet the rules of the permit I have applied under

If you knowingly or recklessly make a statement which is false or misleading to help you get an environmental permit (for yourself or another person), you are committing an offence under the Environmental Permitting (England and Wales) Regulations 2016.

I declare that the information in this application is true to the best of my knowledge and belief. I understand that this application may be refused or approval withdrawn if I give false or incomplete information.

I understand that if I knowingly or recklessly make a false or misleading statement: I may be prosecuted; and if convicted, I may have to pay a fine and/or go to prison. By signing below, you are confirming that you understand and agree with the declaration above.

Title	Mr
First name	David
Last name	Slater
On behalf of (if relevant)	Envirotreast Solutions Limited
Today's date (DD/MM/YYYY)	30/09/2025

Add another signature?

No