

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

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 | |

FOR TRICKLE IRRIGATION

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

PLEASE CALL LOUISE
CLAYTON (DETAILS OVERLEAF)
TO TAKE CARD PAYMENT

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 ☒ Limited company ☐ Charity ☐ Corporate body ☐
Partnership ☐ Sole trader ☐ Club ☐ Other ☐

If other, please specify

Title

Full Name

Company, Charity or
Trading Name

Company or Charity
Registration Number

Registered Address

THE ROUND HOUSE
PIXLEY
HEREFORDSHIRE

Postcode: HR8 2PY

Office: 01531 633659
Mobile:

Telephone Number

Email Address

We will contact you by email unless you tick here ☒

Please specify who we should contact with regard to your site operation.

Site operations contact

Applicant ☐

Agent ☒

For applications for abstraction licences, please also specify who we should contact for invoices and abstraction records (returns).

Invoice address*

Applicant ☐

Agent ☒

Abstraction records contact*

Applicant ☐

Agent ☒

* Not required for temporary or transfer licences.

Enter the agent's details in Section 3, or provide details of alternative or additional contacts on a separate sheet and tick here to show that you have done so. ☐

3. Details of agent or individual authorised to act as application contact

This is who we will correspond with unless otherwise informed. If an agent has signed on behalf of an applicant, please include a letter of authorisation from the applicant allowing the agent to act as signatory.

Title

MS

Full Name

LOUISE CLAYTON

Company, Charity or
Trading Name

HAYGROVE LTD

Position in Company

ASSISTANT TO MANAGING DIRECTOR

Registered Address

REDBANK
LITTLE MARCLE ROAD
LED BURY
HEREFORDSHIRE
Postcode: HR8 2JL

Telephone Number

Office: 01531 637120
Mobile: 07515 294602

Email Address

louise.clayton@haygrove.co.uk

4. Entitlement to apply (only required for abstraction licence applications)

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

Has a right of access

☐

Has an expected right of access

☐

Owner/occupier of land

☒

Date these access rights are expected

For formal abstraction licence applications where you are the landowner/occupier, provide a map with the land boundary and all abstraction and discharge point(s) marked. Please tick here to show that you have done this. ☒

For expected rights of access, please also provide the additional evidence as outlined in Guidance Note WRX. Please tick here to show that you have done this. ☐

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

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)

7.3 Source of supply or location of proposed impoundment

7.4 Site name / reference

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. ☐

TO LICENCE EXISTING, PREVIOUSLY EXEMPT,
WATER ABSTRACTION; TO SAFEGUARD OUR
BUSINESS OF COVERED GROWING OF SOFT FRUIT
IN GLASSHOUSES USING TRICKLE IRRIGATION,
FOR SALE TO DOMESTIC SUPERMARKETS.

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

A. A. Davison

Print name

ANGUS DAVISON

Position

CHAIRMAN

Date

29/08/2019

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

☐ Applicant has signed
☒

Where relevant:

Evidence of negotiations of expected access rights, if applicable N/A
For groundwater abstractions, results of pump test (if not previously submitted)

☐
☐

For Natural Resources Wales' use only:

Date received _____

Reference Number _____

Payment received Yes ☐ Amount received _____
No ☐ Not required ☐