Waste tonnage return form Version: 1.2

Cyfoeth Naturiol Cymru
Natural Resources Wales

Office use only
Date of issue (20/09/2014)

Sent requiring correction (DD/MM/YYYY)

Return rejected (DD/MM/YYYY)

Date received (DD/MM/YYYY)

Return submitted (DD/MM/YYYY)

Use this form to tell us the type and quantity of controlled waste you have processed on your site over the last quarter.

Please read through the whole form and guidance notes before you start filling anything in. **Mandatory fields marked by ***

Your return must be submitted within the following period:
After: and before:

Failure to comply with these dates may result in enforcement.

When completed please post to:
Natural Resources Wales
Customer Care Centre
29 Newport Rd
Cardiff
CF24 0TP

Please contact 0300 065 3000 if you have any queries.

1 Return period and contact details

Return period *
APRIL 16 - JUNE 16

Contact name for this return *
MRS S J CHADWICK

Position *
OWNER

Contact tel. *
01244-533880

Contact email —

2 Permit, operator and site details

Permit No. *
EPR/WP3194FL

Site operator name *
J CHADWICK

Site name *
LOYALDRIVE

Site address *
FACTORY RD
SANDYCROFT
DEESIDE

Postcode *

Type of facility * A20

2 Permit, operator and site details, continued

Are you operating a landfill? *
Yes ☐
No ☑

If yes, go to Section 3. If you are not operating a landfill, go to Section 4.

3 Landfill sites only

This section must be completed for landfill sites.

Remaining void space covered by this permit
_____ cubic metres.

Method of calculating void space

Date last surveyed or estimated (DD/MM/YYYY)

4 Return details

Are you submitting a nil return?*
Yes ☑
No ☐

If submitting a nil return, state reason for nil return, then go to the Declaration – Section 7 on page 2.

If not submitting a nil return was a weighbridge used?
(Complete this if your answer to 4 was No)
Yes ☐
No ☐
If yes, give percentage weighed

_____ %

Now go to Sections 5 and 6 (Waste received and Waste removed).

7 Declaration

Please make sure you have filled in all the sections that apply to you before signing this declaration.

I certify that the information in this return is correct to the best of my knowledge and belief.

I enclose _____ continuation sheets

Title MRS

First name SUSAN JOAN

Last name CHADWICK

Position OWNER

Phone 01244 - 533880

Date (DD/MM/YYYY) 4/3/16

Signature S Chadwick

The information you provide will be used by Natural Resources Wales to enable it to fulfill its regulatory and waste management planning responsibilities

8 The Data Protection Act 1998

We, Natural Resources Wales, will process the information you provide so that we can deal with your application, make sure you keep to the conditions of the license, permit or registration, process renewals and keep the public registers up to date.

- offer you documents or services relating to environmental matters
- consult the public, public organisations and other organisations (for example, the Health and Safety Executive, local authorities, the emergency services, the Department for Environment, Food and Rural Affairs) on environmental issues
- carry out research and development work on environmental issues
- provide information from the public register to anyone who asks
- prevent anyone from breaking environmental law, investigate cases where environmental law may have been broken, and take any action that is needed
- assess whether customers are satisfied with our service, and to improve our service, and
- respond to requests for information under the Freedom of Information Act 2000 and the Environmental Information Regulations 2004 (if the Data Protection Act allows).

We may pass the information on to our agents or representatives to do these things for us.