Environmental permit: Part LPD1 - application for a new waste deployment

About the permit

If you have had discussions with us before your application, give us the case reference or details

N/A

Permit number this application relates to

EPR/AB3891CX

Permit holder name

Mr Daniel & Mrs Carys James

What type of permit do you want to deploy under?

SR2010No4 Mobile plant for landspreading (land treatment resulting in agricultural or ecological benefit)

Contact details

Who can we talk to about your application? This can be someone acting as a consultant or 'agent' for you.

Title Mr

First name David

Last name Powell

Telephone - mobile 07968496178

Telephone - office 01239621354

Email address dave.purlon@gmail.com

Technically competent manager. This is the person who will be responsible for compliance with the permit for this deployment. See the guidance notes on LPD1 for further details.

Title Mr

First name David

Last name Powell

Telephone - mobile 07968496178 **Telephone - office** 01239621354

Email address dave.purlon@gmail.com

About the land you want to treat

Please give details of the main address of the land to be treated

Address Blaeneifed Farm, Llangoedmor

Cardigan

Postcode SA43 2LZ

National grid reference (12 digit) SN 24047 45580

What type of land do you want to treat?

Agricultural land

Total hectares

49

If you are spreading on more than 10 fields, please upload details below

• File: 1.Blaeneifed Fm & Trefwtial Fm field information.pdf - Download

You may spread more than 10 waste streams on the same area of land, provided you submit additional fully completed deployment forms listing the additional wastes. Your benefit statement must take into account the total benefit to the land of all wastes to be spread. Is this deployment one of a batch (multiple deployments) for the same area of land?

No

Is the permit holder the owner or occupier of the land you want to spread on/treat?

No - You must give us details of the land owner or occupier, below.

Details of the land owner or occupier

Organisation name (if relevant) -

Title Mr

First name Geraint

Last name Jones

Address Blaeneifed Farm, Llangoedmor

Cardigan

Postcode SA43 2LZ

Telephone - mobile 07812 588907

Telephone - office -

Email address -

If there is more than one owner or occupant for the area covered by this deployment, you must give us details of each.

Gwyndaf Davies Trefwtial Farm Blaenannerch Cardigan Ceredigion SA43 2AG

Holding No. 55/226/0017 Mobile: 07816 101266

Grid Reference: SN 23733 48030

Do you have the consent of the owner or occupier to carry out the activity?

Yes

Previous land treatment

Has any of the land listed in on the previous page been treated with other wastes, sewage sludge, slurries or manures etc. in the last 12 months?

Yes - You must give us details in the table below and account for them in your benefit statement

If more than 10, please upload a separate document with details below

• File: 2.Blaeneifed Fm & Trefwtial Fm previous spreading.pdf - Download

Which risk band does the activity fall within?

Permit type

SR2010No4 List B wastes (Higher risk)

Location risk

Are you in a lower risk or higher risk location?

Not within Source Protection Zone 2, and/or are over 500 meters from a European site, Ramsar, SSSI

Additional information on sensitive receptors

Your site specific risk assessment must show how you intend to prevent any harm to any SPZ 2, European site, Ramsar or SSSI. For more information on risk assessment please see the accompanying guidance to LPD1 and Technical Guidance Note 'TGN 8.01'.Please indicate which type of risk assessment you have submitted

I am not within an SPZ 2 and/or 500 m of a European site, Ramsar or SSSI but have addressed risks to other receptors in my benefit statement.

Protection of habitats and ecosystemsDoes the land onto which the specified waste is to be spread as part of this deployment fall within scope of the Environmental Impact Assessment (Agriculture) (Wales) Regulations 2017 as semi-natural (habitat)?See guidance for further information.

No - You are required to provide details of the assessment that supports this conclusion and supply evidence to support this.

About the waste

Please list all the individual waste streams you want to spread/use under this deployment, in the table below. We've included an example to help you.Please note: You can only spread 10 waste streams per deployment.Example:List of Waste code (6 digit) - 03 03 05Waste description - De-inked paperPhysical form - SludgeWaste producer - Smith's NewsprintTotal amount being spread/used (tonnes) - 500

	List of waste code (6 digit)	Description of waste	Physical form Stackable/non- stackable	Is the waste high in readily available nitrogen?	Producer of waste & permit number (if applicable)	Total amount being spread/used (tonnes)
1	02 05 02	Waste from the dairy products industry – sludges from on-site effluent treatment	Liquid	No	Dairy Partners, N ewcastle Emlyn	6125
2	02 05 02	Waste from the dairy products industry – sludges from on-site effluent treatment	Liquid	No	Volac, Felinfach	4965
3	02 05 02	Waste from the dairy products industry – sludges from on-site effluent treatment	Liquid	No	First Milk, Haverfordwest	3106
4	-	-	-	-	-	-
5	-	-	-	-	-	-
6	-	-	-	-	-	-
7	-	-	-	-	-	-
8	-	-	-	-	-	-
9	-	-	-	-	-	-
10	-	-	-	-	-	-

Total tonnage

Maximums for single waste stream

About the storage

Are you proposing to store waste in connection with this deployment? You can only store waste at the place where you will use it. You cannot store the waste in these places until we have agreed your deployment.

Yes - You must give us details in the table below

Waste storage details

	Grid reference (12 digit)	Waste type being stored (6 digit List of Waste code)	Storage method	Quantity stored at any one time (tonnes)
1	SN 24614 45895	02 05 02	Field Nurse Tank	120
2	SN 24107 45578	02 05 02	Field Nurse Tank	120
3	SN 23119 48624	02 05 02	Field Nurse Tank	120
4	SN 23589 48526	02 05 02	Field Nurse Tank	120
5	SN 22385 44310	02 05 02	Field Nurse Tank	120
6	SN 22506 44437	02 05 02	Field Nurse Tank	120
7	-	-	-	-
8	-	-	-	-
9	-	-	-	-
10	-	-	-	-

Payment

How do you want to pay for your application fee?

Electronic transfer (e.g. BACS)

Paying by electronic transfer

Please provide your reference for the payment

BACS reference EPDEPSTEPS0065

Amount paid £798

Supporting documents

Please upload your documents here: Location map Benefit statement Waste analysis Receiving soil analysis Site-specific risk assessment You can add a maximum of 10 documents at 50MB each

- File: 3.Blaeneifed Fm & Trefwtial Fm maps.pdf Download
- File: 4.Blaeneifed Fm & Trefwtial Fm Ag benefit.pdf Download
- File: 6.Blaeneifed Fm & Trefwtial Fm soil analysis.pdf Download
- File: 5.Waste ananlysis reports.pdf Download

Checklist for all types of deployment application.

	Tick if complete
Location map	X
Benefit statement	Х
Waste analysis	Х
Receiving soil analysis	Х
Site-specific risk assessment (in accordance with previous questions)	

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.

Yes

Please upload written confirmation here

• File: LPD1 Application of Letter Carys.pdf - Download

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 Powell

On behalf of (if relevant) Mr Daniel & Mrs Carys James

Today's date (DD/MM/YYYY) 01/06/2021