States of Jersey Planning and Environment Department Waste Management (Jersey) Law 2005 - Article 26

Waste Management Licence Application Form (JWL001)

When complete, send six copies of each sheet and all accompanying plans, cross sections and documents to:-

Head of Waste Regulation,
Planning and Environment Department, Environment Division,
States of Jersey, Howard Davis Farm,
La Route de la Trinite, Trinity,
Jersey JE3 5JP

WARNING

It is an offence under Article 100 of the Waste Management (Jersey) Law 2005 to knowingly or recklessly make a statement in this application that is false or misleading in a material particular. Any person found guilty of such an offence shall be liable to imprisonment for a term not exceeding two years or to a fine, or both.

IMPORTANT - PLEASE READ BEFORE COMPLETING THIS FORM

- Please ensure that you have read all the accompanying guidance before proceeding with this application form.
- Each section should be fully completed. An incomplete or insufficient answer will halt the licensing process until a suitable answer is provided. For each section please refer to the guidance provided with the application form.
- An application will not be considered against a poor set of accompanying plans and cross sections these should be drawn up by a competent surveyor, architect or engineer.
- An unsigned application will not be considered.

COMMERCIAL CONFIDENTIALITY

This application form, when completed and submitted, will become a publicly available document. Should you consider that any of the information you are required to provide is a trade secret you are entitled to apply for a certificate of confidentiality under Article 94 of the above Law. To apply for such a certificate please enclose a letter when submitting this form stating clearly which information you wish to be kept confidential and why.

Whilst your application for confidentiality is being considered by the Minister for Planning and Environment the information concerned shall be treated as confidential. You will be informed in writing of the Minister's decision. You may appeal against the Minister's decision - see guidance note 1

Part 1 - The Applicant

1.1 Authorised contact (see note 2)		1000 1000 1000 1000 1000 1000 1000 100
Full name, surname first then all forenames	7	JEANNE BASIL.
Position	0	IRECTOR
Business address	L	es Mougues FARM
LA ROUTE DES COTE	28 3	Du MORD
- SRINITY		Postcode DE3 SBJ
Telephone number		869921
Fax number		867949
e-mail address		
1.2 Is the applicant:		
An individual/sole trader	tick	
		complete section 1.3 then go to part 2
A partnership	-	complete sections 1.4 & 1.5 then go to part 2
A limited company	-	complete sections 1.6 & 1.7 then go to part 2
A Department of the States of Jersey, other than under the Planning and Environment Minister		complete section 1.8 then go to part 2
Other (please detail)		
1.3 Individual applicant - please provide the	following i	nformation:
Full name, surname first then all forenames		
"Trading as" or business name		
Any former "trading as" or business names		
1.4 Partnership - please provide the following	g informat	ion: (see note 3)
Name of partnership (if there is one)		
Business address		
		Postcode
Telephone number		
Fax number		
e-mail address		

1.5 Partnership (continued) - please prov	vide the following information for each partner:
Partner	
Full name, surname first then all forenames	
Business address	
	Postcode
Partner	
Full name, surname first then all forenames	
Business address	
	Postcode
Partner	
Full name, surname first then all forenames	
Business address	
	Postcode
· (14.0 ·) · (3.4 ·) · (3.1 ·) · (3.1 ·) · (3.1 ·) · (3.1 ·) · (3.1 ·) · (3.1 ·) · (3.1 ·) · (3.1 ·)	
1.6 Companies registered under Compan	ties (Jersey) Law 1991 please give:
Company name	GBN GROWERS LTG
Company registration number	53096
Address of registered office	Les Hougues FARM
LA ROUTE Des 1	Cores Du NORD
TRINITY	Postcode 3E35BT
Address of main office (if different)	
	Postcode
Date of formation of company	16TM JULY 1992
Telephone number of company	869921
Fax number of company	967949

similar officer:	
Officer	
Full name, surname first then all forenames	JEANNE BASIL
Position held within the company	DIRECTOR
Full correspondence address	Les Hougues FARM,
LA ROUTE DES CO	TES Du MORD
TRINITY	Postcode JE3 585
Officer	
Full name, surname first then all forenames	CORSON NICHOLAS
Position held within the company	DIRECTOR
Full correspondence address	Les Houquestarm
LA ROUTE DES CO	TES DUMORD
TRINITY	Postcode 5E3 5BT
Officer	
Full name, surname first then all forenames	
Position held within the company	
Full correspondence address	
	Postcode
1.8 Department of the States of Jersey	
Name of Minister	
Full name of Department	
Contact Name	
Contact address	
	Postcode
Telephone number	
Fax number	
e-mail address	

Part 2 - The Site

Site name (if applicable)				
Full site address	0	MAN	son De	Lamas
Rue De LA FALAISE		* 1 * 1 * 1	001. 46.	CH INEK
TAINITY			Postcode	5E35B
Ordnance Survey National Grid Reference				
What is the site currently used for?	5	TORA	Ge - Pratu	cton
2.2 Occupancy of the site	T 195			
Is the applicant the owner of the land this application relates to?	Yes No		go to section 2.3 go to section 2.4	
2.3 Proof of ownership				
Please detail what proof of ownership you have provided with this application.				
2.4 Landowner's written undertaking (see note 5)				
Have you included with this application a written undertaking from the landowner as required by Article 26(3)?	Yes No		go to section 2.5 this application wil	l be refused
2.5 Planning status of the site (see note 6)				The second secon
Does the site have a suitable planning permission for the activities applied for?	Yes No		include copy with a	application
Planning permission reference number		P/2	010/170	11
Date granted		1	3/2011	
2.6 Lawful use of the site				
Please detail what, in the absence of a planning permission, allows the lawful use of the site for the activities applied for.				

Part 3 - Waste Management Activities

3.1 What will be the main waste managemen Please tick one box only	
Landfill	
Transfer station	
Incinerator	
Storage at site other than that of production	
Biological treatment	please specify process below
Chemical treatment	please specify process below
Physical treatment	please specify process below
24	1-/
Separation of C	DASTE on his and water
Separation of C	predict give details below
Separation of Control	DASTE OINS and water
Separation of L	DASTE OINS and water
3.2 Other waste management activities (see nativities to be carried out at the site (e.g. base)	DASTE OINS and water
3.2 Other waste management activities (see nativities to be carried out at the site (e.g. base)	DASTE OINS and water
Separation of Cartier of o	DASTE OINS and water mote 8) ment aling, Pers to Yes please give details below

Waste type	Physical form Delete as appropriate	Tonnes per day	Tonnes per year
Municipal	solid/sludge/liquid/powder/gas		
Hazardous	solid/sludge/liquid/powder/gas		
Health care	solid/sludge/liquid/powder/gas		
Scrap metal	solid/sludge/liquid/powder/gas		
Construction/demolition	solid/sludge/liquid/powder/gas		
Other please specify			
DIL VEGETABLE	-solid/sludge/liquid/powder/gas		250
	solid/sludge/liquid/powder/gas		
	solid/sludge/liquid/powder/gas		
	solid/sludge/liquid/powder/gas		
Total			250
Annual total (if different to	combined totals)(see note 10)		nla.

	wastes (see notel1)	dous wastes			
at the site?	and to decept mazar	Yes No		ase give details b o Part 4	elow
Waste type	Hazard code H1 - H13	Physical form Delete as appropriate		Tonnes per day	Tonnes per week
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
		solid/sludge/liquid/pow	der/gas		
Total					
Annual total (if differ	rent to combined totals)(s	ee note 10)			

Part 4 - Site Operations

4.1 Capacity of the site				
What type of site is being applied for?	☐ Landfill sit ☐ Incinerator ☐ Treatment ☐ Transfer st ☐ Other	r go to station go to s	section 4.2 then 4.5 section 4.3 then 4.5 section 4.3 then 4.5 section 4.4 then 4.5 section 4.4 then 4.5	
4.2 Landfill capacity (se note 12)				
Total void space			cubic metres	
Total area for landfilling of wastes			vergees	
4.3 Incinerator/treatment plant capacities				
Maximum theoretical design throughput		0.5	tonnes per hour	
Proposed actual throughout (if different from above)			tonnes per hour	
Storage capacity for wastes prior to treatment /	- ligh	th	tonnes	
incineration (both tonnes and cubic metres)	9		cubic metres	
Storage capacity for post treatment / incineration	eigh	r'	tonnes	
residues (e.g. ash) (both tonnes and cubic metres)	30		cubic metres	
4.4 Transfer station/other capacities				
Municipal waste storage capacities	Wa	gne	tonnes	
(both tonnes and cubic metres for solids, please state			cubic metres	
units used for liquids or gases)			units:	
Hazardous waste storage capacities	W	one	tonnes	
(both tonnes and cubic metres for solids, please state			cubic metres	
units used for liquids or gases)	units:			
Health care waste storage capacities			tonnes	
(both tonnes and cubic metres for solids, please state	cubic metres			
units used for liquids or gases)			units:	
Construction/demolition waste storage capacities			tonnes	
(both tonnes and cubic metres)			cubic metres	
Scrap metal storage capacities			tonnes	
(both tonnes and cubic metres)			cubic metres	

4.5 Operational status			
Is the application site:	Existing site A new facility	go to section	
4.6 Existing sites (see note 13)			
Date waste management activities began	30	in/ 2	006
Estimated remaining active life (where appropriate)	0	in/ 2	years
4.7 New facilities		$\phi_{i} = \phi_{i}$	
Proposed start date for work at the site	API	RIL 20	11
Estimated active life (where appropriate)		n/A.	years
4.8 Operating hours			
Hours permitted under planning law (if applicable).	Days	From	То
Use 24 hour clock	Monday to Friday		2
	Saturday	:	5
	Sunday	1	
	Bank/public holidays	*	
Hours open for receipt/removal of waste (if different	Days	From	То
from permitted hours)	Monday to Friday	0900	181:00
Use 24 hour clock	Saturday	08 00	18:00
	Sunday	08 00	18:00
M ⁰	Bank/public holidays		
Hours open for processing/handling of waste (if	Days	From	То
different from permitted hours)	Monday to Friday	08 00	18:00
Use 24 hour clock	Saturday	08 00	18:00
	Sunday	08:00	18 00
	Bank/public holidays		

Part 5 - "Fitness" of Applicant

5.1 "Fitness"	
A waste management licence may be granted to a persatisfied that he is fit to carry on the activity to which it related. Financial security Technical resources Relevant convictions for offences	erson only if the Planning and Environment Minister is lates. There are three factors to take into account:
5.2 Financial security (see note 14)	
Please describe below how you intend to demonstrate terms and conditions of the waste management licence expenditure plan for the site with this application.	e that you have sufficient financial resources to meet the (use separate sheets if necessary). You should include an
5.3 Technical resources (see note 15)	
Please give the following details for each person who named below we require a statement of qualifying assessment.	will be responsible for managing the site. For each person experience and we may also want to carry out our own
Full name	BASIL JEANNE
Position	Duector
Name of referee on statement of qualifying experience	1. W P-Corson
	2WP Corson
Full name	
Position	
Name of referee on statement of qualifying experience	t.
	2.
Full name	
Position	

1. 2.

Name of referee on statement of qualifying experience

5.4 Relevant convictions for offences (see notes 16 c	€ (7)
Has the applicant or any relevant person been convicted of any offence?	
Please give full details of each offence below. Continue	
Full name of company or individual convicted	
Position held within company (if relevant)	
Date of conviction	
Name of court	
Offence and penalty imposed	/
	7
Full name of company or individual convicted	
Position held within company (if relevant)	
Date of conviction	
Name of court	
Offence and penalty imposed	
	/
/	

Part 6 - Completion of Application

6.1 Checklist - please tick to confirm inclusion of the following documen	ts (see note 18)	Marine Tolkie
Document	No. of copies	Included?
Completed application form	6	
Continuation sheets - numbered and cross referenced to the section they apply to and signed and dated by the applicant	6	
Company registration or partnership documents	1	
Site location plan	6	
Evidence of land ownership or written undertaking from site owner	Ī	
Copy of planning permission	1	
Financial information, including site expenditure plan	I	2
Statement(s) of qualifying experience	1 of each	
Working plan, including: a written statement plans detail drawings with a full contents list of plan titles, dates and unique plan/drawing reference numbers (see "Guidance Notes on the New Waste Management Licensing System", Chapter 5)	6	
Letter requesting commercial confidentiality	Ĩ	4

6.2 Other relevant documents included	d with this application
Document	
Title	
Date	
Reference number	
Document	
Title	
Date	
Reference number	
Document	
Title	
Date	
Reference number	

Part 7 - Declaration

Any person who, in support of an application made for a Waste Management Licence, knowingly or recklessly makes a statement that is false or misleading in a material particular commits an offence under Article 100 of the Waste Management (Jersey) Law 2005 and is liable to imprisonment for a term not exceeding two years or to a fine, or both

I/we certify that this information is correct.

I/we hereby apply for a waste management licence in respect of the particulars described in this application (including working plan and supporting documentation) (see note20)

Signature(s)

(XXXX

Please note that applicants must sign the declaration themselves, even if an agent is acting on their behalf. An unsigned or incorrectly signed application will not be accepted. For applications from

- more than one person all applicants must sign below
- a company or other corporate body an authorised person should sign below.

Signature	
Name	BASIL JEANNE Director 30. 9.13
Position	Director
Date	30.9.13
Signature	
Name	
Position	
Date	
Signature	
Name	
Position	
Date	

JWL001 v 3.1, 4 August 2006