

Mr. Patrick Power
Glenside Environmental
Cuil Greine House
Ballincollig Commercial Park
Link Road,
Ballincollig
County Cork

Headquarters, PO Box 3000
Johnstown Castle Estate
County Wexford, Ireland

Ceanncheathrú, Bosca Poist 3000
Eastát Chaisleán Bhaile Sheáin
Contae Loch Garman, Éire

T: +353 53 9160600

F: +353 53 9160699

E: info@epa.ie

W: www.epa.ie

LoCall: 1890 33 55 99

3 July 2014

Reg. No. W0214-02

Re: Waste Licence– Ted O'Donoghue & Sons Limited, for a facility located at Ted O'Donoghue and Sons Limited, Knockpogue, Waterfall, County Cork,

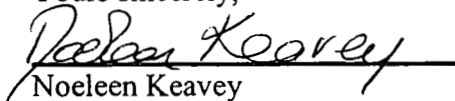
Dear Mr. Power

I refer to your waste licence, reference number W0214-02, in respect of the above referenced facility, and in particular to your application dated 8 July 2009 for a part refund in accordance with Article 45(1) of the Waste Management (Licensing) Regulations of the fee payable to the Agency in respect of the above referenced application.

I am to advise that the Director of the Agency has decided to grant a refund of 50% of the application fee i.e. €8,000.

The Agency can no longer issue any cheques in respect of any refunds we grant to licensees. In order for us to make payments directly to your bank account please complete the following form and return it to *Office of Licensing, Environmental Protection Agency, PO Box 3000, Johnstown Castle Estate, County Wexford.*

Yours sincerely,



Noeleen Keavey

Programme Officer

Office of Climate, Licensing & Resource Use

Enc



ENVIRONMENTAL PROTECTION AGENCY

An Gníomhaireacht um Chaomhnú Comhshaoil

Fax: 9160699
Tel: 053-9160600

Headquarters
P.O. Box 3000
Johnstown Castle Estate
Co. Wexford

International Fax: +353-53-9160697/9160699
International Tel: +353-53-9160600

IRELAND

To:	Phone: 053 9160613
Attention: Office of Licensing	Date: 3 July 2014

**In order for us make future payments directly to your bank account
please complete the following form & return it to Office of
Licensing:**

Name: _____

Address: _____

Contact: _____

Phone No: _____ Fax No: _____

Bank Name: _____

Account No: _____

Sort Code: _____

BIC Code:** _____

IBAN: ** _____

Bank Address: _____

Account Name: _____

Email Remittance: _____

Email Purchase Order: _____

** Please note this information can be found on your bank statement. From 2010 please be advised that these codes are compulsory for all EFT payments.

Regards,
Office of Licensing
Fax: 053 9160699
Email :

licensing@epa.ie