

Ms Maeve Walsh  
RPS Consulting Engineers  
Lyrr Building  
IDA Business and Technology Park  
Mervue  
Galway

Headquarters, PO Box 3000  
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County Wexford, Ireland

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16 July 2014

Reg. No. W0250-01

Re: Waste Licence– Kerry Central Recycling Facility Limited, for a facility located at Kerry Central Recycling Facility Limited, Scart/Caherdean, Killarney, Co. Kerry.

Dear Ms Walsh

I refer to your waste licence, reference number W0250-01, in respect of the above referenced facility, and in particular to your application dated **30 April 2014** 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 Board of the Agency has decided to grant a refund of 50% of the application fee i.e. €11,000.

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,



Dorota Richards

**Programme Officer**

**Office of Climate, Licensing & Resource Use**

Enc



**ENVIRONMENTAL PROTECTION AGENCY**  
*An Gníomhaireacht um Chaomhnú Comhshaoil*

**Fax: 9160699**  
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**Headquarters**  
P.O. Box 3000  
Johnstown Castle Estate  
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**IRELAND**

**International Fax: +353-53-9160697/9160699**  
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<b>To:</b> <b>Attention: Office of Licensing</b>	<b>Phone: 053 9160613</b> <b>Date: 16 July 2014</b>
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**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