# Note: Only planners with a Planted Ancient Woodland Sites (PAWS) scheme should fill in Section 4

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| **Customer Reference Number (CRN)** | **Expression of Interest (EOI) Reference number** |
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| **1. Property, Applicant and Planner / Agent Details** | | | | | | | | | | |
| Woodland Property Name | | | | Applicant Name | | | | | Status | |
|  | | | |  | | | | | *Please Select >>* | |
|  | | | |  | | | | | | |
| Email Address | | | | Contact Number | | | | | Does the applicant have management control of the land? | |
|  | | | |  | | | | | *Please Select >>* | |
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| Management Planner Name (if applicable) | | | | | | | Email Address | Contact Number | | |
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| Agent Name and Company (If Applicable) | | | | | | | Email Address | Contact Number | | |
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| **Restocking Site Details** | | | | | | | | | | |
| WRS area (Ha) | Area of PAWS (ha) | | | | | Six-figure Grid Ref (centre of felling area) | | | | Local Authority |
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| Altitude in metres (above sea level) | | SPHN  Number | | | Felling Licence Reference | | | Does the FLA restocking prescription list the same species and species % as Section 7 (WRS plan)? | | |
|  | |  | | |  | | | *Please Select >>* | | |
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| Is there a Tree Preservation Order (TPO)? | | | Is there a European Protected Species licence? | | | | | Do you intend to make an insurance claim or have you received an insurance payment for the loss of trees due to Phytophthora ramorum ? | | |
| *Please Select >>* | | | *Please Select >>* | | | | | *Please Select >>* | | |

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| **2. Site Background** |
| **2a. Management Objectives** |
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| **2b. Site description** |
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| **3. Background assessment - WRS features (Desk based & Site survey)** | | | |
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| **WRS GeoPDF layers & features on site** | **Description of Glastir layer in/adjacent to wood** | **Consultation Required?** | **How will the WRS GeoPDF layer be dealt with**  **(in accordance with UKFS)** |
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\* Needs to include WRS GEOPDF layers, other potential sensitivities and other determining factors – e.g. power lines, public rights of way, wayleaves, rivers and lake.

| **4. Planted Ancient Woodland Sites (PAWS) Assessment** |
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**Note: Only planners with a Planted Ancient Woodland Sites (PAWS) scheme should fill in Section 4**

| **4a. Potential impacts of PAWS restoration - Ecological Importance Criteria (EIC) – Desk assessment** | | |
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| **WRS GeoPDF layer** | **Description of EIC in/adjacent to wood** | **EIC score**  **(High - 5, Medium - 3, Low - 1)** |
| **Relevant Designations** |  |  |
| **Priority habitats and species** |  |  |
| **Woodland Habitat Networks** |  |  |

| **4b. Ecological Development Criteria (EDC) – Site survey and annotated map** | | |
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| **Ecological Development Criteria** | **Description of EIC in/adjacent to wood** | **EDC Score**  **(High - 5, Medium - 3, Low - 1)** |
| **Mature remnant semi-natural trees & shrubs** |  |  |
| **Presence of site native tree and shrub regeneration** |  |  |
| **Presence of specialist woodland ground flora on site** |  |  |
| **Adjacency and quality of existing semi-natural woodland** |  |  |

| **Ecological Potential Score** |
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| **4c. Threat to PAWS – Site survey and annotated map** | |
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| **Threats** | **Description** |
| **Over shading** |  |
| **Presence of non-native regeneration** |  |
| **Grazing and browsing including deer/squirrels** |  |
| **Invasive non-native plant species** |  |
| **Presence of bracken and brambles** |  |

| **5. Long term Vision and management operations** | | |
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| **5a. Long term vision for restoration** | | |
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| **Operation** | **Statement of intent** | **Measure of success (within 10 years)** |
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| **6. Stakeholder engagement** | |
| **Stakeholder** | **Response** |
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| **7. Plan of Operation** | | | | | | | | | |
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| **Compartment**  **No.** | **Sheet Reference** | **Field**  **Parcel** | **Map ID**  **(e.g.**  **WRS001)** | **Capital Works Number** | **Capital Works Type** | **Species** | **Species**  **%** | **Estimated Quantity**  **(Hectares / Metres / Number of Items)** | **PAWS Present (Y/N)** |
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| **8. Documents submitted in support of this plan** | |
| **WRS Plan** | **Provided**  **(Yes / No / N/A)** |
| Annotated WRS map showing Ecological Development Criteria (e.g. site native trees and shrubs, regeneration, veteran trees) and threats (stock grazing, invasive species) | *Please Select >>* |
| GeoPDF map of operations for WRS contract | *Please Select >>* |
| NRW consent within Sites of Special Scientific Interests (SSSIs) | *Please Select >>* |
| CADW response within 100m of Scheduled Ancient Monument | *Please Select >>* |
| Felling licence | *Please Select >>* |
| Statutory Plant Health Notice | *Please Select >>* |
| European Protected Species (EPS) licence (if needed) | *Please Select >>* |
| Consultation responses | *Please Select >>* |

**Failure to submit all required information at this stage could result in delays during the WRS plan verification process**

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| **Woodland Planner Declaration (PAWS Only)** |

**This declaration must be completed by the registered woodland planner before submitting the finalised PAWS plan to the Welsh Government.**

I confirm all of the information contained in this Woodland Restoration Scheme (PAWS) plan is true, accurate and complete to the best of my knowledge and belief. I confirm I have visited all proposed planting sites. I understand and accept it is my responsibility to ensure this is the case. I confirm if there is any change to the information I have provided, I will notify the Welsh Government of the change within 10 working days. I accept, if any information is outdated, incomplete, misleading or false, the plan may be withdrawn by Welsh Government and passed to another Woodland Planner to complete. Where considered necessary, the Application of Sanctions of the Terms & Conditions for the Registration of Woodland Planners will be initiated.

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| **Signed:** |  | | **Date:** |  |
|  |  |  | |  |
| **Printed Name:** |  | | | |

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| **Declaration** |

This must be signed by the main applicant. An agent may sign where they have been given authority to do so. Where an agent is signing this declaration, the agent must be registered with the Welsh Government to act on behalf of the applicant.

I confirm that all of the information contained in this Woodland Restoration Scheme Plan is true, accurate and complete to the best of my knowledge and belief. I understand and accept that it is my responsibility to ensure that is the case. I confirm that if there is any change to the information I have provided I will notify the Welsh Government of the change within 10 working days. I accept that if a contract is awarded on the basis of outdated information, that contract may be withdrawn by the Welsh Government.

I confirm that I have management control of the land that is the subject of this Forest Management Plan. I am aware of, and have complied with, the conditions that apply to my application and the Forest Management Plan. I declare that I have read, understood and complied with all of the relevant guidance and information relating to the Woodland Restoration Scheme .

I undertake to keep for a period of 10 years from the date of the final payment, and to provide officers of the Welsh Government or their duly authorised agents, within such period as they may determine, such records and information as may be required in respect of this application and in order to determine my compliance with these declarations and undertakings. I agree to repay any aid received together with any interest, if I am asked to do so by the Welsh Government, as a consequence of a breach of any rule, declaration made or undertaking given in this application. I agree to repay, on demand, any overpayments made to me as a result of a miscalculation by the Welsh Government or otherwise.

I will allow duly authorised officers of the Welsh Government, or their duly authorised agents, access to any land or any woodland areas included in the Woodland Restoration Scheme Plan in order to inspect the land, any relevant equipment, storage facilities and records (including computer records), and any other aspect of the land within the Woodland Restoration Scheme Plan in order to verify the accuracy of the information in this application, and I will give them all reasonable assistance for that purpose.

I understand that if my application is successful, I will be required to enter into a Woodland Restoration Scheme Contract and payment of any grant funding will be conditional on compliance with the terms of that contract. If I am offered a contract and do not enter into the agreement, or fulfil the terms of the contract I may be excluded form re-applying to the Woodland Restoration Scheme for the following two calendar years.

I understand that the use of an agent or Registered Planner does not affect my personal responsibility for the accuracy of the information provided in this application, nor does it absolve me of responsibility to comply with the terms of any contract should my application be successful.

I understand that I must not commence project activity, before I have received written confirmation from the Welsh Government to do so. Any expenditure incurred before the approval date is at my own risk and may render the project ineligible for support.

I have read the Fair Processing Notice of the Woodland Restoration Scheme Rules Booklet. I understand that the Welsh Ministers may share, publish or disclose information, including personal information, about my Woodland Restoration Scheme application and Plan with other organisations. I agree to any necessary disclosure or exchanges of information and this extends to the use of information which is created or obtained in connection with my application (including details of payments made to me/my business).

I understand that the publication and disclosure of information by the Welsh Government will be in accordance with the obligations and duties under the Freedom of Information Act 2000, the Data Protection Act 1998, the Environmental Information Regulations 2004 and Commission Regulation (EC) 908/2014. I understand that the Welsh Government may produce and publish maps showing the areas of land that have been brought into the agreements and other information provided may also be disclosed where permitted by law.

I understand that the Welsh Government may also obtain information about me from other organisations, or provide information about me to them, in order to verify the accuracy of the information, prevent or detect crime and protect public funds. These other organisations include government departments, local authorities and other bodies as appropriate.

General Data Protection Regulation - We have updated the privacy notice for our schemes and contracts. [Click here to view](https://gov.wales/rural-grants-and-payments-privacy-notice)

I understand that any person who makes a false declaration or fails to notify the Welsh Government of a material change to the information set out in the Woodland Restoration Scheme Plan may be liable to prosecution. A false, inaccurate or incomplete statement, or failure to notify the Welsh Government of any material changes to the information given in this Woodland Restoration Scheme Plan, may result in termination of the contract and/or recovery of any payments.

I have disclosed details of all other management agreements or grants that I receive, or intend to apply for, that may raise the possibility of me receiving double funding.

I understand that regulations (including controls) may change from time to time. I accept that the Welsh Government may need to update rules and conditions to take into account any such changes and I agree to abide by any changes following notification by the Welsh Government.

**Applicant’s Declaration**

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| **Applicant Signature:** |  | | **Date:** |  |
|  |  |  | |  |
| **Printed Name:** |  | | | |

**Or**

**Agent’s Declaration**

Where the application is submitted by an agent, I, the agent, confirm that:

(a) I have drawn the attention of the applicant to the conditions that apply to this application, including the Applicant’s Declarations set out above, and have informed the applicant that they are responsible for complying with the same; and

(b) I am authorised by the applicant to make the Applicant’s Declarations set out above on their behalf

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| --- | --- | --- | --- | --- |
| **Agent Signature:** |  | | **Date:** |  |
|  |  |  | |  |
| **Printed Name:** |  | | | |