

Quality Welsh Food Certification Ltd

Gorseland, North Road, Aberystwyth, SY23 2WB
phone: 01970 636688 e-mail: fawl@wfsaari.net



APPLICATION FORM FOR CERTIFICATION

Please complete all sections of this Application Form using black or blue ink, making amendments where necessary.

When complete, sign and date the end of this Application Form and return it, along with the Direct Debit Mandate, to the address shown above.

FAWL

Trading Name: _____

Farm Name: _____

Address: _____

Town: _____

County: _____ Post Code: _____

Phone: _____ Mobile: _____ Fax: _____

E-mail: _____

Would you prefer to receive correspondence in Welsh in future?
yes / no

Would you prefer to receive correspondence by e-mail in future? yes / no

Holding No: _____ Size: _____ Hectares: 1 Ha = 2.47 Acres

Herd/Flock Mark: _____ Grid Ref: _____

Are any Scheme Marks in use? _____ *If 'yes', please detail in 'Comments' below.*

***If you keep stock at farms other than the one noted above, please complete below.
If necessary, continue on a separate piece of paper and return with this form.***

Holding Name: _____

Address: _____

Town: _____

County: _____ Post Code: _____

Holding No: _____ Size: _____ Hectares: 1 Ha = 2.47 Acres

Herd/Flock Mark: _____ Grid Ref: _____

Distance from main unit: _____ miles

Separate Movement & Medicine Records? Yes / No _____

Any housing / handling facilities at this site? Yes / No _____

Same management as main unit? Yes / No _____

Same vet as main holding? Yes / No _____

Additional information : _____

Crops on holding? yes / no Combinable crops? yes / no

Fertiliser Stored? yes / no Pesticide Stored? yes / no

Please list any schemes that you enquired about but do not wish to join : _____

Stock Numbers / Niferoedd y Da Byw

Breeding Ewes _____

Ewe Lambs _____

Store Lambs _____

Finished Lambs _____

Suckler Cows _____

Store Cattle _____

Finished Cattle _____

Dairy _____

Pigs _____

Other _____

Please supply the following information:

Name of person responsible for stock: _____

No. of years experience: _____ Qualifications, if any (eg NPTC, HND etc): _____

Person giving medicines, if different from above: _____

No. of years experience: _____ Qualifications, if any (eg NPTC, HND etc): _____

Details of your vet:

Vet's Name: _____

Practice: _____

Address: _____

Town: _____

County: _____ Post Code: _____

Scheme Declarations:

FAWL

I hereby apply for certification under the FAWL Beef and Lamb Scheme and declare that:

- I have read and understood the Scheme's Standards;
- I will comply with those Standards at all times;
- I agree for my farm to be assessed at any reasonable time in accordance with the Scheme's Regulations;
- I am over 18 years of age;
- I have not been, nor am I currently, subject to any legal action concerning food safety, animal welfare, or environmental issue (if this is not the case, please provide details);
- The information provided on this form is true and complete in all respects.

Data Protection Policy:

Quality Welsh Food Certification Ltd (QWFC) is registered with the Data Protection Registrar. Data collected will only be used to manage the schemes administered by us, to manage our relationship with you. We will keep all data confidential but we may disclose some information as set out below:

- To other companies owned by or associated with us in order to process applications for the schemes administered by us;
- To prevent or detect fraud;
- At your written request or with your prior written approval.

Payment:

Subscriptions are collected annually

Please complete the enclosed Direct Debit Mandate and return it with this form.

If you are already a member of Welsh Lamb & Beef Producers and pay by direct debit, please tick here:

Signed: _____ **Date:** _____

When you have completed the form in full, please return it with your Direct Debit Mandate

**Quality Welsh Food Certification Ltd.
Gorseland, North Road, Aberystwyth, SY23 3SD**

FOR OFFICE USE ONLY

DATE RECEIVED:

INITIALS: