Application for Approval of a Food Business Establishment Subject to Approval under Regulation (EC) No. 853/2004

To be completed by the food business operator

Print a copy of this form and fill it in with a black pen in BLOCK CAPITALS.

Complete Parts 1 to 8 inclusive, and the specific sections of Part 9 that relate to the products of animal origin in respect of which you are applying for the approval of your establishment, then sign and date Part 10.

| PART 1 – Establishment for which approval is sought | | |
|---|--|--|
| Trading | g name | |
| | | |
| Full pos | stal address | |
| | | |
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| | | |
| | | |
| Post Co | ode: | |
| DADT | O Tomoto of any desite of animal entire for antick approach is a condi- | |
| PARI | 2 – Type(s) of product(s) of animal origin for which approval is sought | |
| | e the product(s) of animal origin in respect of which you are applying for approval to use the shment? | |
| tick all tha | at apply | |
| | Minced Meat | |
| | Meat Preparations | |
| | Mechanically Separated Meat | |
| | Meat Products | |
| | Live Bivalve Molluscs (Shellfish) | |
| | Fishery Products | |
| | Diary Products | |
| | Eggs (not Primary Production) / Egg Products | |
| | Frogs' Legs / Snails | |
| | Rendered Animal Fats and Greaves | |
| | Treated Stomachs, Bladders and Intestines | |
| | Gelatine | |
| | Collagen | |

| PART 3 – Food busines | ss operator and manag | ement of the establishn | nent | |
|--|---|----------------------------|---------------------------|--|
| Name and full address of | Food Business Operato | r | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Post Code: | | | | |
| Tel: (incl. Dialling Code) | | | | |
| Fax: (incl. Dialling Code) E-mail | | | | |
| E-mail | | | | |
| Full names of managers of the establishment | 1. | 2. | 3. | |
| Job titles | 1. | 2. | 3. | |
| JOD titles | | | | |
| Full control of allows by | 1. | 2. | 3. | |
| Full names of others in control of the business | | | | |
| Job titles | 1. | 2. | 3. | |
| | | | | |
| PART 4 – Use of the es | tahlishment | | | |
| Which of the following act | | in / from the establishmen | nt? (tick all that apply) | |
| | | in / nom the establishmen | it: (tick all that apply) | |
| Wholesale marke | Stand-alone cold store | | | |
| Manufacture | ;t | | | |
| Other processing | (nlease specify) | | | |
| Packing | (piodoc opocity) | | | |
| Storage | | | | |
| Distribution | | | | |
| Cash and carry / | wholesale | | | |
| Catering (prepara | ation of food for consump | otion in the establishment |) | |
| Retail (direct sale | to consumers or other of | customers) | | |
| Market stall or mobile vendor | | | | |
| Other (please spe | ecify | | | |
| PART 5 – Transport of products from the establishment | | | | |
| How will products be transported from the establishment? (tick all that apply) | | | | |
| | | | | |
| | Your own vehicle(s) Contract / Private Haulier | | | |
| | Purchaser's own vehicle(s) | | | |
| Others (please sp | | | | |

| PART 6 – Supply of products from the establishment to other establishments | | | |
|--|--|--|--|
| Which of the following will be supplied with products from the establishment? (tick all that apply) | | | |
| Other businesses that manufacture or process food | | | |
| Wholesale packets | | | |
| Cold stores that are not part of the establishment to which this application relates | | | |
| Warehouses that are not part of the establishment to which this application relates | | | |
| Restaurants, hotels, canteens or similar catering businesses | | | |
| Take-away businesses | | | |
| Retail shops, supermarkets, stalls or mobile vendors that you own | | | |
| Retail shops, supermarkets, stalls or mobile vendors that you do not own | | | |
| Members of the public direct from the establishment to which this application relates | | | |
| Other (please specify) | | | |
| PART 7 – Other activities on the same site | | | |
| Will any of the following activities be conducted on the same site as, or within, the establishment to which this application for approval relates? | | | |
| YES NO APPROVAL CODE | | | |
| Slaughter, including pigs, sheep, cattle poultry, game, etc: | | | |
| Cutting fresh (including chilled and frozen) meat, poultry meat or game: | | | |
| Storage of fresh (including chilled and | | | |
| frozen) meat, poultry or game: | | | |
| PART 8 – Use of the establishment | | | |
| The following information is required in order to process your application and should be sent with this application form if possible. Please indicate which information you are sending now. (N.B. information that is not sent now will still be required before your application can be determined). | | | |
| A detailed scale plan of the (proposed) establishment showing the location of rooms and other areas to be used for the storage and processing of raw materials, product and waste, and the layout of facilities and equipment. | | | |
| A description of the (proposed) food safety management system based on HACCP principles | | | |
| A description of the (proposed) establishment and equipment maintenance arrangements | | | |
| A description of the (proposed) establishment, equipment, and transport cleaning arrangements | | | |
| A description of the (proposed) establishment, equipment, and transport cleaning arrangements A description of the (proposed) waste collection and disposal arrangements A description of the (proposed) water supply A description of the (proposed) water supply quality testing arrangements | | | |
| A description of the (proposed) water supply | | | |
| A description of the (proposed) water supply quality testing arrangements | | | |
| A description of the (proposed) arrangements for product testing | | | |
| A description of the (proposed) pest control arrangements | | | |
| A description of the (proposed) monitoring arrangements for staff health | | | |
| A description of the (proposed) staff hygiene training arrangements | | | |

| A description of the (proposed) arrangements for record keeping | | | |
|--|--|--|--|
| A description of the (proposed) arrangements for applying the identification mark to product | | | |
| packaging or wrapping. | | | |
| PART 9 – Products to be handled in the establishment / activities | | | |
| Which of the following activities will be conducted in the establishment? Indicate by giving the approximate quantities to be handled in kilograms or litres per week. (tick all that apply) | | | |
| PART 9(1) – Minced Meat and Meat Preparations | | | |
| Handling minced meat | | | |
| Handling meat preparations | | | |
| Full details of activities and specific products handled | | | |
| | | | |
| | | | |
| How many tonnes of minced meat in total will be handled in the establishment | | | |
| per week on average?How many tonnes of meat preparations in total will be handled in the | | | |
| establishment per week on average? | | | |
| PART 9(2) – Mechanically Separated Meat | | | |
| Full details of activities and specific products handled | | | |
| Tuli details of activities and specific products naticied | | | |
| | | | |
| | | | |
| How many tonnes of mechanically separated meat in total will be handled in the establishment per week on average? | | | |
| the obtablishment per week en average. | | | |
| PART 9(3) – Meat Products | | | |
| Full details of activities and specific products handled | | | |
| | | | |
| | | | |
| How many tonnes of meat products will be handled in the establishment per | | | |
| week on average? | | | |
| PART 9(4) – Live Bivalve Molluscs (Shellfish) / Fishery Products | | | |
| Full details of activities and specific products handled | | | |
| | | | |
| | | | |
| How many tonnes of Live Bivalve Molluscs (Shellfish) / Fishery Products will | | | |
| be handled in the establishment per week on average? | | | |

| PART 9(5) – Raw Milk / Dairy Products | | | |
|--|--|--|--|
| Raw Milk | | | |
| Dairy Products | | | |
| Full details of activities and specific products handled | | | |
| I dil details of activities and specific products fiancied | | | |
| | | | |
| | | | |
| How many litres of Raw Milk will be handled in the establishment per week on everge? | | | |
| average?How many litres / tonnes of Dairy Products will be handled in the | | | |
| establishment per week on average? | | | |
| PART 9(6) – Eggs (not Primary Production) / Egg Products | | | |
| Full details of activities and specific products handled | | | |
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| | | | |
| How many tonnes of Eggs will be packed in the establishment per week on average? | | | |
| How many litres of Egg Products will be handled in the establishment per | | | |
| week on average? | | | |
| PART 9(7) – Frogs' Legs and Snails | | | |
| Frogs' Legs | | | |
| Snails | | | |
| | | | |
| Full details of activities and specific products handled | | | |
| | | | |
| | | | |
| How many tonnes of frogs' legs in total will be handled in the establishment | | | |
| per week on average?How many tonnes of snails in total will be handled in the establishment per | | | |
| week on average? | | | |
| BART 0/0) Pandared Animal Esta and Oreasias | | | |
| PART 9(8) – Rendered Animal Fats and Greaves | | | |
| Rendered Animal Fats | | | |
| Greaves | | | |
| Full details of activities and specific products handled | | | |
| | | | |
| | | | |

| How many tonnes of rendered animal fats will be handled in the establishment per week on average? | | |
|---|--|--|
| How many tonnes of greaves will be handled in the establishment per week on average? | | |
| on average: | | |
| PART 9(9) – Treated Stomachs, Bladders and Intestines | | |
| Treated Stomachs | | |
| Treated Bladders | | |
| Treated Intestines | | |
| Full details of activities and specific products handled | | |
| | | |
| | | |
| How many tonnes of treated stomachs in total will be handled in the | | |
| establishment per week on average? How many tonnes of treated bladders in total will be handled in the | | |
| establishment per week on average? How many tonnes of treated intestines in total will be handled in the | | |
| establishment per week on average? | | |
| PART 9(10) – Gelatine | | |
| Full details of activities | | |
| | | |
| | | |
| | | |
| How many tonnes of gelatine in total will be handled in the establishment per week on average? | | |
| | | |
| PART 9(11) – Collagen | | |
| Full details of activities | | |
| | | |
| | | |
| How many tonnes of collagen in total will be handled in the establishment per | | |
| week on average? | | |
| PART 9(12) – Stand-alone Cold Store | | |
| Full details of activities and specific products handled | | |
| | | |
| | | |
| | | |
| How many tonnes of product will be handled in the establishment per week on average? | | |

| PART | 10 – | APPL | ICA. | TION |
|-------------|------|------|------|------|
| | | | | |

I hereby apply, as food business operator of the establishment detailed in Part 1, for approval to use that establishment for the purposes of handling products of animal origin for which Regulation (EC) No. 853/2004 lays down requirements, as set out in the relevant Parts of this document.

| Signature of Food Business Operator | Date | |
|--|------|--|
| Name in BLOCK LETTERS | | |

If you need any help or advice about how to complete this form, or about the products to which the Regulation relates, or the circumstances in which approval under the Regulation is required, please contact he officer named below.

IMPORTANT

Please notify any changes to the details you have given on this form, in writing to the Food Authority at the address shown below.

This form should be returned to: Principal Food Safety Officer, Environmental Health and Housing Service, Rushmoor Borough Council, Council Offices, Farnborough Road, Farnborough, Hampshire, GU14 7JU.

If you would like to speak to an officer or require further advice on completion of the form, please contact the Principal Food Safety Officer on 01252 398136.

Further food hygiene advice is also available from the Food Standards Agency website www.food.gov.uk