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| **OF&G Quality Manual** | RD263 Biofertiliser Scheme Application/Renewal Application Form |
| Documents referred to | RD265, RD261 |

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| **Operator Details:** | | | | |
| Company Name: | |  | | |
| Registration Number | |  | | |
| Contact Name: | Title: | | First name: | Surname: |
| Job Title: |  | | | |
| Address: |  | | | |
| Tel No: |  | | | |
| Mobile No: |  | | | |
| E-mail: |  | | | |
| Website |  | | | |

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| Site address if different from above | | | | | | |
| Contact Name: | Title: |  | First name: |  | Surname: |  |
| Job Title: |  | | | | | |
| Address: | | | | | | |
| Tel No: |  | | | | | |
| Mobile No: |  | | | | | |
| E-mail: |  | | | | | |

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| **Other contacts for REAL Newsletter** | |
| Name | E Mail address |
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| **I/We have chosen to apply for:** (Tick boxes that apply) | **Tick** |
| End of Waste (PAS + Quality Protocol + Scheme Rules) |  |
| End of Waste Scotland (PAS + SEPA’s Regulatory Position Statement + Scheme Rules) |  |

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| **Items enclosed with Application/Renewal** | **Tick** |
| A copy of the Hazard Analysis and Critical Control Points Plan (HACCP) |  |
| Copy of Pollution Prevention Control Permit / Waste Management Licence / Environmental Permit or Exemption (whichever is applicable); |  |
| Copy of Animal Health approval in principle or full approval to process animal by-products / catering wastes |  |
| A copy of the Quality Policy and Management |  |
| A digital map showing all relevant areas |  |
| Relevant test results |  |
| Signed copy of RD265 Declaration and Licensing Agreement |  |

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| **Pre-requisites (Clause 6 of REAL Scheme Rules)** | | | | | | | |
| Planning Consent Code and Date of Issue:  Please specify if the planning consent is not required by the planning authority or if it is and consent has been obtained, write the code/unique reference code in the box, or enclose a copy with your application/renewal. | | | | | |  | |
| Planning Authority contact details: | | |  | | | | |
| Animal by-products:  (please fill in this part only if your input types include animal by-products). | | | **Approved under National ABP regs.** | | | | **Tick all that apply** |
| Catering waste meat included | | | |  |
| Catering waste meat excluded | | | |  |
| **Approved under EU ABP regs.** | | | | |
| Category 3, specify types: | | | |  |
| Category 2 rendered, specify types: | | | |  |
| Animal Health Officer’s contact details: | | |  | | | | |
| Please describe the type of authorisation.  (authorisation name given by the regulator) | **Authorisation type** | | | **Tick all that apply** | **Reference number** | | **Issue date** |
| Environmental Permit | | |  |  | |  |
| Waste Management License | | |  |  | |  |
| Other (please specify) | | |  |  | |  |
| Regulatory local officer’s name and contact details | |  | | | | | |

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| **Please provide the following information** |  |
| Plant capacity (Thousands of tonnes/annum) |  |
| Annual Input (Thousands of tonnes/annum) |  |
| Annual Output (Thousands of tonnes/annum) |  |
| Are test results compliant with Table 1 or Table 2 of PAS110 and available for inspection? |  |

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| **Output type** |  |
| Whole digestate (tonnes/annum) |  |
| Separated fibre (tonnes/annum) |  |
| Separated liquor (tonnes/annum) |  |

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| **Waste dispatched** (tonnes/annum) |  |

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| **Input type** | **Tick** |
| Farm: over 50% agricultural feedstock e.g. manures and crops |  |
| Waste: over 50% waste feedstock e.g. food waste |  |
| Other: over 50% non-waste/agricultural feedstock e.g. distillery by-products |  |

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| **Input type descriptions** | **Tick** |
| ABP |  |
| Non ABP |  |
| Agricultural |  |
| Commercial |  |
| Industrial |  |
| Municipal |  |
| Products |  |
| Co-products |  |
| Residues |  |
| Wastes |  |

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| **Process type** | **Tick** |
| Wet AD |  |
| Dry AD |  |

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| **End Market** | **Tick** |
| Agriculture and soil/field-grown horticulture |  |
| Forestry |  |
| Land restoration |  |

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| **By signing this form, I/we confirm that we have read and agree to all the terms and conditions and requirements specified in REAL’s Biofertiliser Certification Scheme Rules.** | | | |
| Operators Name: |  | Signature: |  |
| On behalf of: |  | Date: |  |

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| **Please return the completed Application/Renewal Form, signed RD265 Declaration and Licensing Agreement for Biofertiliser Certification Scheme and supporting documentation:**  **by e-mail to: info@ofgorganic.org** |

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| **Payment Methods. See RD261 for current certification fees.** | |
| BACS | Account No. 20605153. Sort Code 16-58-10. Triodos Bank, Deanery Road, Bristol. BS1 5AS. Please inform OF&G when payment has been made. |
| Credit or Debit Card | We can also take payment by Credit or Debit Card, please contact us for further details. |
| Direct Debit | A Direct Debit scheme is available at an extra charge for amounts over £250. Please ask for further details. |
| Cheque | Cheques should be made payable to OF&G. Please write your account number and invoice number on the back of the cheque. |