



EGG MARKETING AND ANIMAL WELFARE REGULATIONS

APPLICATION FOR REGISTRATION OF AN EGG PRODUCTION FACILITY

For Official Use Only		
Production Site	---UK-	-SCO
Number(s)	---UK-	-SCO
	---UK-	-SCO
Application for new site	<input type="checkbox"/>	
New house on existing site	<input type="checkbox"/>	
Area Office:	-----	

- Please read the Explanatory Leaflet EMR1 carefully before completing this form.
- Please write clearly.
- **Your production site must be inspected before it is stocked.**

1. Addresses (*computer data screen*)

1a. Your Name or Company Name and Address		
	Postcode:	Tel No:
	Fax No:	Mobile:
	eMail:	
Website Address:		

1b. State whether limited company, privately owned, partnership etc:	
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2. Related Business (*computer data screen*)

2a. Please provide the registration number(s) of other egg production establishment(s) owned or run by the owner/	Site ID	Premises Name	Production Type
			--- ---
			--- ---
			--- ---
			--- ---
			--- ---

company:			--- ---
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2b. Name and Address of premises to which you wish registration to apply (if different from above)	
	Postcode: Tel No:
	Fax No: Mobile:
	eMail:

2c. The Correspondence Address (if different from the above)	
	Postcode: Tel No:
	Fax No: Mobile:
	eMail:

3. Production Type

Please indicate the type of egg production system(s) you wish to register:

Cage: Free Range:

Barn: Organic:

4. Accreditation Bodies

If you are producing organic eggs please supply details of the Organic Certification Body you are registered with and your site approval number(s):

4a. Organic Certification Body:	
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4b. Organic Site Approval Number:	
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4c. BEIC Accredited:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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4d. Freedom Food assured:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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4e. Where eggs are to be packed at an egg packing centre please provide the premises name and	ID No	Premises Name

registered number:		
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5. Keeper

5a. Please provide the name of the competent person(s) who will be responsible for looking after the hens' welfare (hereafter referred to as "keeper"):	
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5b. Keeper's Address and contact details if different to 1, or 2 above:	
	Postcode: Tel No:
	Fax No: Mobile:
eMail:	

5c. If the business is registered as an agricultural holding please provide the following:	The CPH number: (County Parish Holding Number)	
	The BRN number: (Business Reference Number)	
Please provide the map reference coordinates for the production site premises:		

(If you do not know the map grid reference for the premises and have access to the internet you can find it by going to [SEPA](#) and searching by the production site postcode.)

5d. Please state the Local Authority Area in which the packing centre is located (if completing electronically please select from one of the lists):	-----
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6. Hen House Data

Please state the number of hen houses by type of production and the number of hens for each house on site:

Hen House Name	Hen House Number	Production Type	Number of hens to be housed	Date at Housing	Age at Housing	Breed	For Cage Only		Birds/ Cage	Maximum legal stocking limit of house if known
							Cage Type	Enriched		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
								Yes <input type="checkbox"/> No <input type="checkbox"/>		
TOTALS										

7. Range Area

Please provide detail of under what circumstances the land is being made available:

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Hen House Name	Hen House Number	Land Type eg Owned, Rented, Tenanted or Other	Area of Land	Include a Map of Land Area	Include a copy of Land Rental Agreement	Rental date Expires
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		-----	Acres <input type="checkbox"/> Hectares <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

DECLARATION

I/We

- Apply for registration of my/our egg production facility(ies) detailed in this application.
- Declare that the information given in this form is correct to the best of my/our knowledge and belief.
- Make this application as the partner(s) etc of the production facility(ies) to which this application relates. (please give status eg proprietor(s))
- **will notify the Scottish Government before making any changes that may affect the status of the above-mentioned Egg Production Site.**

Signature(s):

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Date:

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Please return the completed form to your local Egg Marketing Officer or send to:

**The Scottish Government
Rural Payments and Inspections Directorate
Room 330
Pentland House
47 Robb's Loan
Edinburgh EH14 1TY**

Alternatively you can eMail the completed form to the EggsandPoultryMailbox@Scotland.gsi.gov.uk

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Egg Marketing Officer Report

1. Description of poultry houses and land:

1.1	No of hens	
1.2	Litter Area (M ²)	
1.3	Droppings Area (M ²)	
1.4	Stocking density-internal (b/M ²)	
1.5	Perches (M)	
1.6	Feeder provision (cm/b)	
1.7	Drinker provision (cm/b or b/cup)	
1.8	Nests (/b)	
1.9	Pop holes (no and size)	
1.10	Available Land --- ---	
1.11	Stocking Density-external (b/M ²)	
1.12	Vegetation/shelter	

2.	State Origin Term if used:	
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3. Producers shall record information on the farming methods, specifically for each farming method used:

(For the purposes of record keeping, instead of keeping records of sales and deliveries, producers may keep files of invoices and delivery notes marked as indicated below).

Records to be kept where applicable	Check Box √, X or N/A
a. The date of placing, age at placing and number of laying hens.	-----
b. The date of culling and the number of hens culled.	-----
c. Daily egg production.	-----
d. The number and/or weight of eggs sold per day or delivered daily by other means.	-----
e. The names and addresses of purchasers.	-----
f. Where a feeding method is indicated in accordance with Article 15 of 557/2007 producers shall record the following information, specifically for each feeding method used (eg Corn Fed or Four Grain): i) the quantity and type of feed supplied or mixed on site; ii) the date of delivery of feed.	-----
g. Where a producer uses different farming methods on a single production site, the information referred to above shall be broken down by hen house.	-----

4. Map provided where required:	Check Box \surd , X or N/A -----
5. Rental agreement provided where required:	Check Box \surd , X or N/A -----
6. Where indicated, check the CPH and BRN numbers against SIACS before signing off for filing:	CPH:
	BRN:
7. Use the issued GPS device to check the Grid Reference on-site and use in preference to the submitted reference number if different:	Grid Reference Number as per GPS device on-site:
SEPA	
8. Check that the postcode provided is valid. Find a postcode:	Please confirm the postcode has been verified as correct:
Royal Mail	
9. General comments:	

Marketing Officer's Signature:

Date: