

APPLICATION FOR REGISTRATION OF PREMISES

Please return this completed form to:

The Veterinary Department
Local County Council/Corporation

Re: E.C. (Fresh Meat) Regulations, 1997*
E.C. (Minced Meat and Meat Preparation) Regulations 1996*
E.C. (Meat Products ad other Products of Animal Origin) Regulations, 1997
and
1997*
***Delete as appropriate**

I/We, _____
(Company/Trading Entity Name)

of, _____

(Registered Address of Company/Home address of Sole Trader)

Hereby apply to the Local Authority named above for Registration of the Food Premises outlined below:

(Address of Food Premises)

Phone No: _____ **Fax No:** _____

For the production of Fresh Meat/Minced Meat and Meat Preparations/Meat Products or other Products of Animal Origin (Delete as appropriate)

PTO

I/we enclose the additional information on the premises, equipment, facilities, procedures, preparations, products, staff, placing on the market etc as below:

Signed _____

Date _____

Block Letters _____

Status _____

(Manager/Owner etc)

Additional information in connection with Application for Registration of a Meat Premises (tick as appropriate all information supplied).

- | | | |
|-----|---|--------------------------|
| 1. | Plans: (a) site plan | <input type="checkbox"/> |
| | (b) premises plans & specifications | <input type="checkbox"/> |
| | (c) product Flow plans | <input type="checkbox"/> |
| | (d) drainage/effluent disposal plans | <input type="checkbox"/> |
| 2. | Planning Permission e.g. planning reference number | <input type="checkbox"/> |
| 3. | License for disposal of effluent, Local Government Water Pollution Acts, 1997 and 1990 (No 1. Of 1970 and No. 21 of 1990) | <input type="checkbox"/> |
| 4. | Proposed products, preparations, recipes, ingredients. | <input type="checkbox"/> |
| 5. | Details of cooking equipment and process (if applicable). | <input type="checkbox"/> |
| 6. | Type & sources of raw material. | <input type="checkbox"/> |
| 7. | Maximum intended production: Tonnes/Week | <input type="checkbox"/> |
| 8. | Capacity of cold rooms. | <input type="checkbox"/> |
| 9. | Equipment details, including temperature controls for preparation rooms. | <input type="checkbox"/> |
| 10. | Cleaning Programme. | <input type="checkbox"/> |
| 11. | Staff: Numbers, Training Programmes. | <input type="checkbox"/> |
| 12. | Risk Assessment Programme | <input type="checkbox"/> |
| 13. | Water Reports: Compliance with E.C. (Quality of Water Intended for Human Consumption) Regulations 1988 (No. 81 of 1988). | <input type="checkbox"/> |
| 14. | Destination of product (a) Trade (export) and/or (b) Home Market. | <input type="checkbox"/> |

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