

The Animal and Plant Health Agency Scottish Government Welsh Government

Department of Agriculture, Environment and Rural Affairs, Northern Ireland

United Kingdom National List – Application to add an agricultural or vegetable plant variety to the UK National Lists

Plant Varieties Act 1997 and The Seeds (National Lists of Varieties) Regulations 2001 (as amended)

The Animal and Plant Health Agency, Eastbrook, Shaftesbury Road, Cambridge, CB2 8DR. Tel: 0208 026 5993

1. Applicant's name and full postal address: (see note 1) Postcode or ZIP: Telephone number (incl. national dialling code): Email address:	
or ZIP: Telephone number (incl. national dialling code):	
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or ZIP: Telephone number (incl. national dialling code):	
or ZIP: Telephone number (incl. national dialling code):	
Telephone number (incl. national dialling code):	
Email address:	
2. Name and full postal address of the proposed Maintainer, if different from above a Ma	
Follow link to Maintainer Form https://assets.publishing.service	
uploads/system/uploads/attachn	
file/710957/form-pvs16.pdf	
Postcode	
or ZIP:	
Telephone number (incl. national dialling code):	
Email address:	
3. Name and full postal address of the person who bred or discovered and developed the in title) if different from above:	variety (or successor
Postcode	
or ZIP:	
Telephone number (incl. national dialling code):	
Email address:	
4. Full postal address for correspondence if different from above: (see notes 1 and 2)	
Postcode	
or ZIP:	
Telephone number (incl. national dialling code):	
Email address:	
Email address:	

	Details of plant variety																		
5.	Species:																		
6.	Breeder's reference number																		
7.	Where appropriate	propo	sed v	ariety	den	omir	natio	<u>.</u>	-1	1			ı	ı					
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8.	8. Has an application been submitted for UK or for Community Plant Variety Rights? (CPVR) Yes											No							
If ' Yes ', Please state date of application And state whether UK or EU																			
9.	Have any NL ap	plication	ons be	en ma	ade ir	n any	y othe	r Men	nber S	State	?					Yes		No	
	If 'YES ' please give the following details																		
	Country		<u>_</u> _	te of A	Application No.					√ari	ety nan	ne or E	Breede	rs' Re	eferer	nce			
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	purchase the		_											-	,	Yes		No	
	(b) If in test in mo	ore tha	n one	- COLIN	ntrv v	whic	h co	untry	do vo	ni wi	ich tl	he r	eno	rt to be	nurch	L	 rom?		
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	(c) If the report ca	annot l	be pu	rchase	ed do	o yo	u wis	h tes	s to	be c	arrie	d o	ut in	the Uk	</td <td>Yes</td> <td></td> <td>No</td> <td></td>	Yes		No	
10. Is the variety, or does the variety contain, a genetically modified organism as defined by Section 1 Environmental Protection Act 1990?								ed by	Section	<u>10</u> 8	of the								
									No										
	If 'YES' please pro																		ils
	of such consent an States under the pr								his ir	clud	les c	ons	ent	s issue	d by o	ther El	J Mei	nber	
11.	Is any material to b								od o	r foo	nd ind	arec	dien	t within	the m	neaning	of th	6	
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	If 'YES' please give details and provide copies of any authorisations:																		
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Sign	ature of Applicant														Date				
					(ori	iginal	signa	ture ur	less e	maile	ed)	_							_
Nam	e in BLOCK letters																		
	and on behalf of note 2)																		

Data Protection

Any personal data which you have provided on this form will be processed in accordance with the Data Protection Act 2018. For information on how we handle personal data please go to www.gov.uk and search Animal and Plant Health Agency personal information charter.

Notes for Guidance

- (a) Where the application is made by or through an agent it must be accompanied by an authority completed by the applicant.
 - (b) Where the applicant resides outside the EU an address for service or agent must be nominated within the EU.
- 2. The application may be completed by an individual person, a partnership or a body corporate. Where an application is made on behalf of a company it must be signed by a person qualified to do so.
- 3. For current National Listing fees please see https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/426004/pbr-fees.pdf.
- 4. (a) For BACS payments the completed Remittance Advice Slip (RAS1 or RAS2) should be sent by e-mail to lncome.aph@sscl.gse.gov.uk.
 - (b) For payment by cheque the completed Remittance Advice Slip (RAS1 or RAS2) with a cheque made payable to the Animal and Plant Health Agency should be sent to Shared Services Connected Ltd, Moorside, Monks Cross Drive, Huntington, York, YO32 9GZ,
 - (c) For payment by credit card: Phone +44(0) 1633 613800