# Milk Production Reduction Scheme

## Claim for payment

## MPRS2

## Notes about this form

- A. Please use CAPITAL LETTERS and black ink.
- B. Please complete all parts of the form.
- C. This form and all supporting documents must be posted to us at the address below.
- D. Forms and proof must be received by the deadline(s) published on GOV.UK. You must allow adequate time for delivery by post.
- E. Forms and proof received after the deadline(s) will not be accepted.
- F. Only submit this form if, for the reduction period you applied for, you have received confirmation that your application (MPRS1) was accepted.

### Part A - General details

1) Name and address of applicant, including trading name:

#### If you make a mistake

- Do not use correction fluid.
- Cross through the mistake and re-enter the correct details. Write your initials next to any changes.
- You can get another copy of this form from GOV.UK: search for 'milk reduction'.

#### **Data Protection Act**

Defra is the data controller for personal data you give to us or we hold about you. We use it in line with the Data Protection Act. For more information, go to www.gov.uk/rpa, choose 'Contact RPA' and click on 'Personal information charter'.

2) Name and address of main contact (if different from 1): an differ Postcode Pe

Postcode

Contact telephone number:

Email address:

Complete at least one box below.

Single Business Identifier (SBI):

Number (TRN):

**Firm Reference** Number (FRN):

Note: You will find your TRN in your milk quota records. Your FRN is on any remittance advice you have received from RPA.

Part B - Cows' milk deliveries		
1) Reduction period claiming for (dd/mm/yy)	From:	То:
1a) Total volume of cows' milk actually delivered	Amount:	Unit - kgs or litres
to first purchasers in the reduction period.		
b) Volume of delivery reduction that RPA		
confirmed you could apply for payment on, in the letter we sent you.	Amount:	Unit - kgs or litres
1c) Actual volume of cows' milk delivery		
reduction for which payment of aid is applied for.	Amount:	Unit - kgs or litres
Note: This must be no more than the		
amount entered at 1b.		
2) Tick this box to show that you've included proc volume of cows' milk referred to in 1a?	of showing the to	otal
Part C - Declaration		
a. The details above are true, accurate and com	pleted to the be	st of my knowledge and belief.
b. I understand that my claim may be subject to	administrative a	nd/or physical checks.
c. I understand that if I fail to provide any of the information that is false, then this application applicant may be reclaimed together with interview.	will be rejected,	•
d. I understand that payment will be made on the only if:		on of cow milk deliveries but
<ul> <li>this does not exceed the amount stated at</li> </ul>	question 1b	<b>b</b>
<ul> <li>no payment reductions have been applied.</li> </ul>		7
e. I certify that:		
<ul> <li>this is the only claim I have submitted to day OR</li> </ul>	ate	M.
<ul> <li>I have submitted two claims. One is for the reduction period.</li> </ul>	e first reduction p	period and one is for the fourth
Please check that you have completed all que supporting information before submitting you copy of this form.		
Signature:		
Capacity of person signing - specify (for example - partner or director):		
Date:		