



**For internal use only**

Centre name

Receipt date

Licence number

# Beef Carcase Classification Scheme Registration details

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## Notes about this form

- A.** This form must be completed by operators, classifying carcasses of bovines aged 8 months or over under the Beef Carcase Classification scheme.
- B.** Before completing this form you must read the '[The Beef Carcase Classification scheme: registration](#)' page on the GOV.UK website
- C.** You can save a copy of this form to fill in before printing, or print it and complete in CAPITALS.  
Please remember to get all relevant signatures. Then scan your form and send it to us at [MTS.carlisle@rpa.gov.uk](mailto:MTS.carlisle@rpa.gov.uk) or post it to the address at the bottom of the form.
- D.** Please provide full details of all directors / partners. If there is not enough space available please continue on a separate sheet and attach to the form. Please include the UK licence number that the sheet refers to.

For information on how we handle personal data go to [www.gov.uk](http://www.gov.uk), and search for '[Rural Payments Agency Personal Information Charter](#)'

## Declaration and undertakings

By completing this form you are confirming that you have read and understood the provisions of Regulation EUR 2013/1308, Regulation EUR 2017/1182 and Regulation EUR 2017/1184 and are aware of the obligations you need to meet.

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## Part A - Slaughterhouse details

Name under which the regulated Slaughterhouse is operated.

Name and business address of  
slaughterhouse including postcode:

Licence number

Telephone number

email address

## Part B – Business Structure

Please indicate the type of business (tick)

Unlimited company	Go to <b>B(i)</b>	Company director(s)	Go to <b>B(ii)</b>
Limited company	Go to <b>B(i)</b>	Sole trader / partnership	Go to <b>B(iii)</b>

## Part B(i) – Unlimited/Limited Company Details (as registered on Companies House)

Company registration number

Name and registered office address including postcode:

## Part B(ii) – Company Director(s) (Provide full details for all company directors. If required continue on to a separate sheet and attach.)

Title Home address including postcode:

Forename(s)

Surname

Signature

Title Home address including postcode:

Forename(s)

Surname

Signature

Title Home address including postcode:

Forename(s)

Surname

Signature

**Part B(iii) – Sole Trader / Partnership details (Provide full details for all partners: delete as appropriate, or if required continue on a separate sheet and attach.)**

Title Home address including postcode:

Forename(s)

Surname

Signature

Title Home address including postcode:

Forename(s)

Surname

Signature

Title Home address including postcode:

Forename(s)

Surname

Signature

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**Part C – Date on which you/your company became occupier of the regulated slaughterhouse or date of name change**

Date

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**Part D – Forecast of throughput**

A reasonable forecast (expressed as a weekly average) of the number of bovine animals aged 8 months or over to be slaughtered during the next 12 months, if possible, based on the actual number of such animals slaughtered in that slaughterhouse (if any) during the preceding 12 months.

Number

## **Part E - Small scale operators using the the union scale**

Under the current regulations small scale bovine operators are not required to classify carcasses of bovines aged 8 months or over. Small scale bovine operators are defined as operators of approved slaughterhouses at which less than 150 such carcasses, per week, as an annual average, are slaughtered..

However, small scale operators, who choose to classify bovine carcasses, must register under the Beef Carcase Classification scheme and will be required to meet scheme requirements on all bovines aged 8 months or over slaughtered at their plant.

Please sign and date below.

I am a small scale operator and wish to register under the Beef Carcase Classification scheme.

Title

Forename(s)

Surname

Signature

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## **Part F – Signature of person completing the form**

I hereby confirm that I am authorised to sign this form and confirm that the information provided in this document is true and accurate.

Title

Forename(s)

Surname

Date

Signature

Company

Status

Telephone number

Email address

Rural Payments Agency, Eden Bridge House, Lowther Street, Carlisle, Cumbria, CA3 8DX