



APHA office stamp

Application for an Approved Finishing Unit (Enhanced) with Grazing in England

Important Notes

- Please contact APHA for guidance in preparing this application.
- Applications should be submitted to the TB Units Team, Animal & Plant Health Agency, Isca Building, Manley House, Kestrel Way, Exeter, Devon, EX2 7LQ or emailed to CSCTBUnits@apha.gov.uk. The Terms and Conditions for Approval and Operation of an Approved Finishing Unit (Enhanced) with Grazing (TR566) should be referred to when completing this application.
- Please complete Parts A, B and C and attach the required supporting documents as listed at Part D.
- Incomplete forms will not be accepted.
- **Please use BLOCK letters.**

Part A - Details of Applicant

1. Name and address of the person applying for the approval (who must be the person responsible for the management of the Approved Finishing Unit (Enhanced) (AFUE) with grazing

Postcode

2. Position of responsible person/applicant

3. Tel No. (incl. national dialling code)

4. Fax No. (incl. national dialling code)

5. Mobile No. (if available)

6. Email address (if available)

Part B - Details of proposed unit to be approved

1. Name of proposed unit

2. CPH of unit (can be added following approval)

3. Owner(s) of premises (if different from Part A)

4. Postal address of premises (if different from Part A)

Postcode

5. Do you have any other cattle under your ownership or care?

Yes No

6. If 'Yes' give details including CPH, number of cattle and location of cattle

7. Will you be accepting cattle from herds not under TB restrictions?

Yes No

8. Are equipment or personnel dedicated to the unit?

Yes No

9. Are there adequate TB testing facilities?

Yes No

10. Proposed maximum no. of cattle in the unit

11. Parish Testing Interval

Part C - Declaration

The declaration **MUST** be signed by the applicant (responsible person) named at question 1 Part A.

I wish to apply for approval to operate an AFUE with grazing and I understand that approval is subject to an inspection by an APHA Veterinarian and that additional conditions to those listed in the Terms and Conditions for the Approval and Operation of an AFUE with Grazing in England (TR566) may be detailed if approval is granted.

I hereby declare:

- the information supplied with this application form is true to the best of my knowledge and belief
- I undertake to notify APHA immediately if there is a significant change of management or staff or the approved premises undergoes significant structural repair, maintenance or refurbishment
- I will be responsible for the management of the unit
- I will ensure that the operation of the facility meets with all requirements for the welfare of cattle within the unit
- I will ensure that the system to collect run-off water meets the Protecting our Water, Soil and Air: Code of Good Agricultural Practice
- I have read and understood the conditions for approval and operation in the Terms and Conditions for the Approval and Operation of an AFUE with Grazing in England (TR566) and I undertake to comply with them

I understand and accept that the details of this AFUE with grazing, including my contact details, will be entered on the public website list for such units.

Yes No

Signature

Date

Name in
BLOCK LETTERS

DATA PROTECTION

For information on how we handle personal data please go to www.gov.uk and search Animal and Plant Health Agency Personal Information Charter.

Part D - Documents to be submitted with this application

Site plan (this must include all details specifically annotated as stipulated in the Biosecurity Protocol and Contingency Plan))*

Checked as received
by APHA office:

Biosecurity Protocol for Approval and Operation of an Approved Finishing Unit (Enhanced) with Grazing in England (TR567). The Protocol must be signed by the operator's Private Veterinary Surgeon *

Contingency Plan for Approval and Operation of an Approved Finishing Unit (Enhanced) with Grazing in England (TR568). The Plan must be signed by the operator's Private Veterinary Surgeon*

**applications cannot be processed without these documents*

Part E - Inspection by APHA Veterinarian (for completion by APHA only)

Name of APHA
Veterinarian
inspecting premises

Date of inspection

Proposed maximum number of cattle in the unit

Are any other animals located on the premises?

Yes No

If other animals are located on the premises, are they out with the confines of the proposed unit and is the degree of separation on the unit plan satisfactory? Please give details and illustrate the degree of separation on the unit plan:

Describe the boundaries between other livestock (including cattle) and water courses. Grazing must be contiguous and the entire unit contained within a single, discrete boundary. Dispersed parcels of grazing land must not be included:

Describe how the operator will record batches of calves entering the unit and determine when they are eligible to be turnout out to grazing. Calves must complete two consecutive tuberculin skin tests with negative results before being allowed out to graze. At least one of those two tests (the one closest to the intended date of turnout) must be completed at severe interpretation:

Describe how the operator will maintain adequate separation between batches of calves and prevent nose-to-nose contact (this must be outlined in the Biosecurity Protocol (TR567)):

Describe the isolation accommodation for Reactor and/or Inconclusive Reactor animals:

Describe the system to collect run-off water from the unit:

Describe how manure, bedding and slurry will be stored and disposed of:

Describe the measures taken to prevent access to cattle accommodation by wildlife:

Describe the measures taken to minimise contact between cattle and wildlife at grazing:

If supplementary feeding is given, describe how this is provided. Feeding of compounds, concentrates, blends, straights or roots at grazing is prohibited. Feeding of supplementary forage at pasture is permitted:

If equipment, machinery, personnel etc. are being shared with other premises describe the arrangement in place (this should be detailed in the separate Biosecurity Protocol (TR567)) and signed by the Private Veterinary Surgeon):

Describe the TB testing facilities:

Will cattle from herds which are not under TB restrictions be included in the proposed unit? Yes No

I confirm the following (for the unit to be approved all conditions **must** be met):

- | | |
|--|---|
| 1. Measures are in place to ensure that there is no contact between the cattle on the unit and any other cattle or other livestock, either directly or indirectly e.g. from dirty water run off. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2. If equipment, machinery, personnel etc. is shared with other premises there is an adequate biosecurity plan in place. | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 3. The TB testing facilities are adequate for the number of stock and meet conditions for biosecurity. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4. The operator has confirmed that the unit's Delivery Partner can carry out the testing at the required frequency. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5. The applicant is aware that the details of their AFUE with grazing are to be entered onto a public website. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 6. The cattle have no access to watercourses. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7. Adequate measures are in place to prevent access to the cattle accommodation and feed stores by badgers | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 8. The operator's Biosecurity Protocol (TR567) is: | |
| Completed in full | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Includes a biosecurity advisory visit report | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Describes how the recommendations in the biosecurity advisory visit report have been implemented | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Signed by the operator's Private Veterinary Surgeon | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 9. The operator's Contingency Plan (TR568) is: | |
| Completed in full | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Signed by the operator's Private Veterinary Surgeon | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Any further comments relating to inspection of the proposed unit?

I confirm that the conditions necessary for approval as an AFU (Enhanced) with grazing have been met.

Signature of inspecting APHA
Veterinarian

Date

The following additional conditions must be met for this unit to operate as an AFUE with grazing:

Signature of inspecting APHA
Veterinarian

Date

Part F - Approval for the AFUE with Grazing

I confirm that from this report and the attached supporting documents that approval can be given for this unit to operate as an AFUE with grazing

Approval is subject to compliance with the conditions in the Terms and Conditions (TR566) for approval and operation of the unit and any additional conditions listed above.

Signature of Veterinary Head of
Field Delivery (VHoFD)/APHA
Veterinarian

Date

Name in BLOCK LETTERS

Part G - Revocation of Approval for the AFUE with Grazing

This cancels the approval for the unit to operate as an AFUE with grazing for TB restricted cattle

Issued on

This revocation of approval has immediate effect and will remain in force until a new application is submitted and approval given following a satisfactory inspection.

Signature of
VHoFD/APHA
Veterinarian

Date

Name in
BLOCK
LETTERS

DATA PROTECTION

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APHA is an Executive Agency of the Department for Environment, Food and Rural Affairs and also works on behalf of the Scottish Government, Welsh Government and Food Standards Agency to safeguard animal and plant health for the benefit of people, the environment and the economy.

HM3 Stamp	Name:		Date Received:		WS ID:	
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