The Tuberculosis in Animals (England) Order 2021 The Tuberculosis (Wales) Order 2010 (as amended)



APHA office stamp						

Application for a Licensed Finishing Unit

Important Notes

- Please contact Animal and Plant Health Agency (APHA) for guidance in preparing this application.
- Applications should be submitted to the Veterinary Head of Field Delivery (VHoFD)/Veterinary Lead Wales (VLW) at your local APHA office.
- The conditions for approving these units are in the Terms and Conditions of the Approval and Operation of an Licensed Finishing Unit (TR429)/TR429(W)), which 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	3. CPH(if applicable)					
1. Name and address of the person applying for the	4. Tel No. (incl. national dialling code)					
approval (who must be the person responsible for the management of the Licensed Finishing Unit (LFU))						
	5. Fax No. (incl. national dialling code)					
	6. Mobile Number (if available)					
Postcode						
2. Position of responsible person/applicant	7. Email address (if available)					
 Part B – Details of proposed unit to be approved Name of Proposed Unit CPH of Unit(to be added if the unit is approved). Owner(s) of premises (if different from Part A) Postal address of premises (if different from PartA) 	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. Are equipment or personnel dedicated to the unit? Yes No 8. Are there adequate testing facilities? Yes No 9					
	Proposed maximum no. of cattle in the unit					

■ 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 LFU and I understand that approval is subject to an inspection by a Veterinary Inspector and that additional conditions to those listed in the Terms and Conditions (TR429/TR429(W)) may be detailed if approval is granted.

I hereby declare:

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- 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
- I will ensure that the system to collect run-off water meets the code of Good Agricultural Practice for the Protection of Water
- I have read and understood the Terms and Conditions of the Approval and Operation of an LFU
 (TR429)/TR429(W)) and I undertake to comply with them.

 *delete as necessary

Γ								
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 nformation Charter.								
■ Part D – Docume	ents to be submitted wi	th this a	pplication	on				
		•	. •					Checked as received by APHA office
• Site plan (the animal area, biosecurity points and extent of site to be approved)*								
 Movements of cattle, both those within the proposed LFU and also any other cattle kept on the premises must be clearly detailed including loading/unloading for transportation. 								
Cattle that are not part of the LFU must be kept outside of the boundaries of the proposed LFU at all times.								
Drainage of effluent and waste water must be annotated on the plan*								
If equipment or personnel are to be shared a biosecurity plan should be included*								
Plan for the treatment of manure/slurry/bedding*								
	*Appl	ications ca	nnot be p	rocesse	ed witho	ut these docu	ments.	
■ Part E – Inspection by Veterinary Officer/Senior Veterinary Investigator (APHA)								
Name of VO/SVI Inspecting Premises					Date	of Inspection	n	
Proposed maximum number of cattle in unit								
Are any other animals located on the premises?								
If 'Yes', are they outwith the confines of the proposed unit and is the degree of separation on the unit plan satisfactory. Please give details.								

OFFICIAL-SENSITIVE

Describe the boundaries of the unit.									
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.									
If equipment, machinery, personnel etc. are being shared with other premises describe the belief.	oiosecu	urity pla	an in						
piace.									
Describe the TB testing facilities.									
Dodding to TD todaing tacinates.									
For All Proposed Units:									
I confirm the following (for the unit to be approved all conditions MUST be met):									
 Measures are in place to ensure that there is no contact between the cattle on the unit and any other cattle, either directly or indirectly e.g. from dirty water run off 	Yes		No						
2. If equipment, machinery, personnel etc. is shared with other premises there is an adequate biosecurity plan in place	No		N/A						
 The testing facilities meet the guidelines set in the approval conditions and are adequate for the number of stock 	Yes		No						
 The operator has confirmed that the unit's Delivery Partner can carry out any testing that may be required 	Yes		No						
5. The cattle accommodation and feed stores are adequately protected from wildlife	Yes		No						
Any further comments relating to inspection of the proposed unit?									

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					Pleas	se tick a _l	opropriate box	
I confirm that the con	ditions necessar	y for approval as a LFU ha	ve been met.					
Signature of Inspecting VO/SVI			Da	te				
The following additio	nal conditions m	ust be met for this unit to op	perate as an I	_FU:				
Signature of Inspecting VO/SVI			Da	te				
■ Part F – Approva	I for the LFU							
I confirm that from the	is report and the	attached plan that approva	I can be giver	n for this	s unit to op	perate a	s a LFU	
Approval is subject to compliance with the conditions in Schedule 1 and any additional conditions listed above.								
Signature of VHoFD/VLW/VO/ SVI				Da	ıte			
Name in BLOCK LETTERS								
■ Part G – Inspection for Compliance								
Date of Inspection		Name of person carrying out inspection					VO/VI/AHO	
Is compliance with th	ne conditions of the	ne approval satisfactory?			Yes		No 🗌	
Date of Inspection		Name of person carrying out inspection					VO/VI/AHO	
Is compliance with th	ne conditions of the	ne approval satisfactory?			Yes		No 🗌	
Date of Inspection		Name of person carrying out inspection					VO/VI/AHO	
Is compliance with th	ne conditions of the	ne approval satisfactory?			Yes		No 🗌	
Date of Inspection		Name of person carrying out inspection					VO/VI/AHO	
Is compliance with th	ne conditions of the	ne approval satisfactory?			Yes		No 🗌	
*If No the approval should be passed to the VHoFD/delegated veterinary inspector for consideration of revocation of the approval								
■ Part H – Revoca	tion of Approva	l for the LFU						
This cancels the approval for the unit to operate as an LFU								
Issued on								
		mediate effect and will re wing a satisfactory inspe		until a	a new app	lication	ı is	

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Signature of VHoFD/VLW/VO/SVI			Date	
Name in BLOCK LETTERS				

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.