

PIG QUALITY ASSURANCE SCHEME (PQAS) FARMER APPLICATION FORM

Note: A separate application form must be completed for each herd number submitted for audit.

Please use BLOCK CAPITALS only to complete this form

Please enter here the full Herd Number as allocated by the Department of Agriculture and Food (Note: **All** letters and numbers must be inserted, one per box) as per the example:

Example	X	B	1	2	7
Herd No.					

Herd Owner / Manager Details	
Name of Owner of this herd number	
Name of manager or person responsible for this herd number (if different)	
Address for correspondence:	
House / Farm Name (if appropriate)	
Postal Address 1	
Postal Address 2	
Postal Address 3	
Postal Address 4	
County	
Telephone No.	
Mobile Phone No.	

Producer Declaration:

- **I acknowledge receipt of the PQAS Producer Standard (Rev 02) and I believe that I can meet the requirements.**

Signed (Farmer): _____ Date: _____