

## BEEF AND LAMB QUALITY ASSURANCE SCHEME (BLQAS) 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:

<b>Herd No.</b>		/							/	
<b>Example</b>	V	/	1	3	5	0	2	7	/	2

<b>Herd Owner / Manager Details</b>	
Name of Owner of this herd number	
Name of manager or person responsible for this herd number (if different)	
<b>Address for correspondence:</b>	
Postal Address 1	
Postal Address 2	
Postal Address 3	
Postal Address 4	
County	
Telephone No.	
Mobile Phone No.	
<b>Additional Details</b>	
Is there an outside farm with the same Herd No. that needs to be included in the audit?	Yes ____ / No ____ (Tick to choose)

**Producer Declaration:**

- **I acknowledge receipt of the BLQAS Producer Standard (Rev 01) and I believe that I can meet the requirements,**
- **I understand that the audit will be conducted by a Bord Bia appointed independent inspection body.**

Signed (Farmer): \_\_\_\_\_ Date: \_\_\_\_\_