# Application for approval of a food business establishment subject to approval under Assimilated Commission Regulation (EU) No. 210/2013 pursuant to Assimilated Regulation (EC) No. 852/2004

To be completed by the food business operator (FBO).

Print a copy of this form and fill it in with a black pen in BLOCK CAPITALS or complete it on screen. Complete parts 1 to 8 inclusive in relation to the products of which you are applying for the approval of your establishment, then sign and date part 9.

You should notify the local authority in writing of any changes to the details on this form, including any changes in the operations carried out and products handled in the establishment.

# Local authority

Local authority name: Nottingham City Council

Local authority address:

**LH Box 45**

Nottingham City Council

Safer Business (Food and Health & Safety)

Environmental Health & Public Protection

Resident Services

Loxley House

Station Street

Nottingham

NG2 3NG

Contact email and/or phone: food.enforcement@nottinghamcity.gov.uk

# Premises for which approval is sought

Trading name(Name under which someone conducts their business): : Click or tap here to enter text.

Full premises address (including postcode): : Click or tap here to enter text. Telephone: : Click or tap here to enter text.

Email: : Click or tap here to enter text.

# Individual details and business structure

Please indicate the type of business;

* Company Now complete 3a
* Partnership Now complete 3b
* Sole trader Now complete 3b
* Other type Provide details on a separate sheet and attach \*

\*Other business types will be treated on a case by case basis to identify the natural person or legal person required to be compliant with food law within the food business under their control

## 3a. Company details (as registered with Companies House or equivalent)

(Provide full details for all company directors - If required continue on separate sheet and attach)

Full company name: Click or tap here to enter text.

Registered office address: Click or tap here to enter text.

(inc. postcode)

Company registration number: Click or tap here to enter text.

Director(s) name(s): Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

## 3b. Complete only if Partnership / Sole trader

(Provide full details for all Partners - If required continue on separate sheet and attach)

Duly authorised representative: Click or tap here to enter text.

Position: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

Contact name two: Click or tap here to enter text.

Position: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

Contact name three: Click or tap here to enter text.

Position: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

# Establishment managers and contacts

**Manager**- responsible for day to day operations of the establishment:

Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

**Technical Manager:**

Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

**Out of hours emergency contact:**

Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

# Publication of FBO information

The Food Standards Agency (FSA) has a requirement under Assimilated Regulation (EU) No. 2017/625 to publish details of all approved food establishments in the UK. The minimum detail to be included is the approval number; name of establishment; town/region; along with details of the activities which have been approved. This information is published on the FSA’s website (https://www.food.gov.uk/). If approval is granted to your establishment, your details will be supplied to the FSA for publication.

In addition to this information, the FSA intends to also include the full postal address of approved establishments. This information helps enable potential customers find food producers in their area.

Please indicate if you would like your address details to be withheld:

Yes [ ]

 No [ ]

# Type of activities for which approval is sought and products to be processed/activities to be conducted by the establishment (Please detail as below)

|  |  |  |  |
| --- | --- | --- | --- |
| **Approval** | **Activity** | **Average throughput per week in kilograms** | **Details of activities** |
| Sprouts (as defined in Article 2 of Assimilated EU law Regulation (EU) No. 208/2013) | Producing plants (PdP) |   Enter text here  |   Enter text here  |

# Supply of products from the establishment to other establishments

Which of the following units will be supplied with products from the establishment? (Mark X to all that apply)

* Other businesses that manufacture or process food [ ]
* Wholesale packers [ ]
* Cold stores that are not part of the establishment to which this application relates [ ]
* Warehouses that are not part of the establishment to which this application relates [ ]
* Take-away businesses [ ]
* Retail establishments that you own i.e. shops or supermarkets, restaurants or similar caterers supplying the final consumer that you own [ ]
* Retail establishments that you own i.e. shops or supermarkets, restaurants or similar caterers supplying the final consumer that you do not own [ ]
* Members of the public direct from the establishment to which this application relates [ ]
* Other (please specify) [ ]

# Information and documentation

The following information is required in order to process your application and should be sent with this application form if possible. Please indicate which information you are sending now

N.B. information that is not sent now will still be required before your application can be determined.

Mark X to all that apply

* A detailed scale plan of the proposed establishment showing the location of rooms and other areas to be used for the storage and processing of raw materials, product and waste, and the layout of facilities and equipment
* A description of the proposed food safety management system based on HACCP principles[ ]
* A description of the proposed establishment and equipment maintenance arrangements [ ]
* A description of the proposed establishment, equipment, and transport cleaning arrangements [ ]
* A description of the proposed water supply quality testing arrangements [ ]
* A description of the proposed arrangements for product testing [ ]
* A description of the proposed pest control arrangements [ ]
* A description of the proposed waste collection and disposal arrangements [ ]
* A description of the proposed monitoring arrangements for staff health [ ]
* A description of the proposed staff hygiene training arrangements [ ]
* A description of the proposed arrangements for record keeping [ ]

# Application

I hereby apply, as detailed in parts 1-8 above, to use that establishment for the purposes of producing sprouts or seeds intended for sprouting under Assimilated Commission Regulation (EU) No. 210/2013 pursuant to Assimilated Regulation (EC) No. 852/2004 lays down requirements as set out in the relevant parts of this document

Name: Click or tap here to enter text.

Job Title: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.