

#### **AMENDMENT FORM**

# for a Dairy Food Business Operation under the European Union (Food and Feed Hygiene) Regulations, 2020 (S.I No. 22 of 2020) INFORMATION NOTE

#### • This form should be used for the following:

- ✓ There is a change to the legal name / trading name of the Food Business Operation (FBO) entered on the Register of Food Businesses.
- ✓ There is a change to the nominated contact(s) for your FBO.
- ✓ To remove activities for which approval/registration is no longer required.
- ✓ To request recommencement of an approved/registered activity that is subject to suspension.
- ✓ To notify the Department of Agriculture, Food and the Marine of proposed changes to the approved or registered infrastructure/premises/equipment/processes/products prior to the commencement of works irrespective of whether these changes will result in a change to the approval and/or registration.

# • This form should NOT be used for the following – contact Milk Hygiene Division for further guidance:

- Apply for approval/registration to operate as a FBO with the Department for the first time, including transfer of supervision from another authority.
- \* Apply for additional activities for which approval/registration is required or those previously revoked.
- In the case of the sale/change of ownership/take-over/acquisition of the FBO by another FBO/Company.
- It is the responsibility of the FBO to ensure that all the details recorded with the Department are correct and up to date. The onus is on the FBO to notify this Department of any changes to an existing approved and/or registered premises.
- Incomplete or incorrectly signed forms will be returned for completion and resubmission.
- **Section 1**: This section is mandatory. The information supplied must match your Certificate of Approval/Letter of Registration.
- **Section 2**: In the case of a Company or Registered Business Name (Trading As), the information supplied must match that recorded with the Companies Registration Office (CRO) or the form will be returned.
- **Section 3**: This section should be completed where there is a change to the postal address for receipt of correspondence issuing from Milk Hygiene Division in relation to the FBO.
- **Section 4**: This section should be used to add an additional contact, update details of an existing contact or remove a contact associated with the FBO. The person(s) identified shall be understood to have authority to receive correspondence relating to hygiene issues, TB notification, Trader Notices, etc issued from the Department.
- Section 5: This section should be used to notify the Department of the activity(ies) listed on the current Certificate of Approval/Letter of Registration, for which approval/registration is no longer required, i.e. where the activity has ceased.
- **Section 6**: This section should be used to request permission to recommence an activity for which you were previously approved/registered, and is subject to suspension. If you wish to commence an activity, that is subject to approval/registration, for the first time or you wish to recommence an activity which was subject to a revocation, please use the appropriate application form.
- **Section 7**: This section should be used where you wish to make changes to the infrastructure/premises and should be submitted to Milk Hygiene Division in *advance* of commencement of works.
- Section 8: <u>Legal Person (Company)</u>: Where there is a change to the legal name of the Company or the addition of a Trading Name, the form must be signed by a Director and the Secretary of the Company. The details must match that recorded with the Companies Registration office or the form will be returned. For all other amendments the signature of a Director or the Secretary is sufficient. <u>Natural Person(s)</u>: Signature of the natural person(s).
- **Section 9**: Where there is a change to the legal name of the Company or the addition of a Trading Name, the Company Seal must be applied at this section, a rubber stamp version is not acceptable.

# Information Regarding the Collection and Sharing of Personal Data

#### Why the Department needs it?

The personal data collected in this form is required for the purpose of proposed amendments to approved and/or registered Food Business Operators under the European Union (Food and Feed Hygiene) Regulations, 2020 (S.I. No. 22 of 2020). The Department will not collect any personal data which is not needed.

#### What does the Department do with this information?

The Department of Agriculture, Food and the Marine is fully committed to keeping all personal data submitted by its customers fully safe and secure during administrative processes. All necessary technical measures have been put in place to ensure the safety and security of the systems which hold this data.

No third parties have access to your personal data unless the law allows them to do so. In line with this commitment the Department will sometimes share your data with other government departments, public bodies, organisations and other EU member states which perform public functions to assist them in the performance of their statutory duties or when it is in the public interest.

#### What are your rights?

You have a right to see the information we hold on you by making a request in writing to the email address below. If at any point you believe the information the Department retains on you is incorrect you can request to have it corrected. If you wish to raise a complaint on how the Department have handled your personal data, you can contact our Data Protection Officer who will investigate the matter. The Data Protection Officer can be contacted as follows: Data Protection Officer, Data Protection Unit, Data Management Division, Department of Agriculture, Food and the Marine, Pavilion A, Grattan Business Centre, Dublin Rd, Portlaoise, Co. Laois. R32 K85.

Email: dataprotectionofficer@agriculture.gov.ie

#### Where can I get more information?

Additional information on Data Protection is available at the following: gov.ie - Food Safety, Public Health & Consumer Issues (www.gov.ie)

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	SECTION 1: THIS SECTION IS MANDATORY FOR ALL APPLICATIONS						
•	Please complete in BLOCK CAPITALS						
	FBO Name:			Approval/Registration No <sup>1</sup> :			
	Please select your amendme	nt(s)					
✓	Change to name of Food Busines	Change to name of Food Business Operation – Complete Sections 2, 8 and 9					
✓	Change to Postal Address for correspondence – Complete Sections 3 and 8						
✓	Food Business Operation Contacts – New/amended – Complete Sections 4 and 8						
✓	Remove Activities for which approval and/or registration is no longer required – Complete Sections 5 and 8						
✓	Request resumption of an Activity(ies) subject to suspension – Complete Sections 6 and 8						
✓	Change to Infrastructure/Premises – Complete Sections 7 and 8						
	SECTION 2: CHANGE TO NA	AME OF FO	OOD BUSINESS OPF	RATION			
J	Please complete in BLOCK CAPITA		303 300233 02				
	,						
	Use this Section if you wish to notify the Department of a change to the legal name of the Food Business Operation entered on the Register of Food Businesses.						
	New Company Legal Name:						
	Company CRO No <sup>2</sup> :						
	Trading Name: (if applicable)						
	(ii applicable)						
	CRO No for Trading Name: (if applicable)						
	rame: (ii applicable)						
	Company Address as						
	per CRO incl. Eircode:						
	Site Address incl. Eircode:						
	Identify the Address to be used for written correspondence: CRO Company CRO Trading Site				ling Site		
	Telephone:		Email:				

 $<sup>^{1}</sup>$  Can be found on your letter of registration/approval or your registration/approval certificate

<sup>&</sup>lt;sup>2</sup> Companies Registration Office Number

SECTION 3 – CHANGE TO POSTAL ADDRESS FOR CORRESPONDENCE					
Please complete in BLOCK CAPITALS					
Please note that all correspondence from Milk Hygiene Division relating to your FBO shall issue to this address.					
New Postal Address incl. Eircode:					
SECTION 4: NOMINATED CONTACTS - NEW/AMENDED/REMOVAL					
Please complete in BLOCK CAPITALS					
The person(s) identified shall be understood to have authority to receive correspondence in the form of Trader Notices, etc, issued from the Department. In each case, please indicate whether this is a new contact, updating an existing contact or notification to remove a person as a contact for the FBO.					
New Contact: Update Existing Contact: Remove Contact:					
Forename: Surname:					
Phone: Mobile:					
Email:					
New Contact: Update Existing Contact: Remove Contact:					
Forename: Surname:					
Phone: Mobile:					
Email: Email:					
New Contact: Update Existing Contact: Remove Contact:					
Forename: Surname:					
Phone: Mobile:					
Email:					

## SECTION 5: REMOVAL OF ACTIVITY(IES) WHERE APPROVAL/REGISTRATION IS NO LONGER REQUIRED

Please complete in BLOCK CAPITALS

Complete this section if you are no longer carrying out activities for which you are approved and/or registered. Please note that upon receipt of notification of cessation of an activity, the process of suspending or revoking the approval and/or registration for the specified activity shall be commenced.

Approval/Letter of Registration that are no longer being u	undertaken:
SECTION 6: REQUEST RESUMPTION OF ACTIVITY(IES)	CURRENTLY SUBJECT TO SUSPENSION
Please complete in BLOCK CAPITALS	
Complete this section if you wish to recommence an active previously approved and/or registered. If you wish to comme for the first time or you wish to recommence an active appropriate application form.	mence an activity, that is subject to approval/registratio
<b>N.B</b> . You may not resume the activity without prior author request the case shall be referred to the relevant inspector required.	· · · · · · · · · · · · · · · · · · ·
Please specify below the activities, currently subject to su and/or registered for, that you wish to resume:	uspension, for which you were previously approved

#### SECTION 7: CHANGE TO INFRASTRUCTURE/PREMISES/EQUIPMENT/PROCESSES/PRODUCTS

Please complete in BLOCK CAPITALS

Please outline details of proposed changes below:

Use this section if you intend to carry out structural changes to approved or registered premises, e.g., new / changes to line operations, installation of major items of equipment, expansion of premises, add new processes or products etc. Please note that failure to notify this Department of any such changes, prior to the commencement of works, may result in production being suspended to allow for the approval process to be concluded.

Please have the following documents available for the Local Inspector upon request:
Copy of site plans, ideally to scale of 1:100 presented in A0 or A1 size
Copy of premises plans and specifications presented in A0 or A1 size
A risk assessment and control measures during construction
Copy of drainage / effluent disposal plans presented in A3 size
Copy of updated product flows, Food Safety Management System, including HACCP

#### Please note: -

- ✓ Your HACCP must be updated to reflect the proposed changes and be made available to your local dairy inspector on request.
- ✓ Independent of an approvals process, it is your responsibility to ensure compliance with other legislative requirements i.e., planning permission, environmental controls, etc.
- ✓ You must keep your local Dairy Produce Inspector(s) informed of the schedule of works, including construction works, equipment installation/operation/performance and calibration pre commercial production.
- ✓ Having completed construction of the facility / processing line and finalised the HACCP plans and SOPs, you must contact your local Dairy Produce Inspector(s).
- ✓ As a Food Business Operator, you should be satisfied that you can fully comply with the provisions of the food safety legislation and operate the proposed Food Business Operation to the requisite standard.

Please indicate in the table below what, if any, additional activities (not covered by your current approval and/or registration) you intend to commence upon completion of the infrastructure/premises changes outlined above:

Activity	Tick
No change to activities	
Handling of Own Milk and manufacture of dairy products excluding raw milk sales for direct	
consumption	
Collection and handling of raw milk from suppliers	
Manufacture of raw milk products	
Manufacture of heat-treated dairy products (including pasteurised milk)	
Cutting/Wrapping/Repacking	
Trader/Agent/Broker	
Dry blending of dairy products	
Manufacture of composite products	
Manufacture of Infant Formula	
Temperature Controlled Storage	
Ambient Storage	
Other, please specify:	

#### SECTION 8: FBO DECLARATION (THIS SECTION IS MANDATORY FOR ALL APPLICATIONS)

Please complete in BLOCK CAPITALS

I understand that in accordance with Regulation 5 of the European Union (Food and Feed Hygiene) Regulations, 2020 (S.I. No. 22 of 2020), 'a person shall not operate a food business to which Article 4(3) of Regulation 853/2004 (laying down specific hygiene rules for food of animal origin) applies other than and in accordance with an approval granted for the purposes of those provisions (food business approval)'. I further understand that I cannot recommence an activity, currently subject to suspension, without prior Departmental authorisation which is being sought by the submission of this application.

I understand that failure to fully complete this application form or provide all necessary supporting documentation may result in the form being returned for completion and/or a delay in the consideration of my application.

I declare that the information contained within this form, and associated documentation, is correct to the best of my knowledge and belief.

Note: This form should be signed by both the Director and Secretary with the Company Seal affixed at Section 8 in the case of a name change to the Company (section 2). For all other Amendments (sections 3, 4 and 5) a Directors signature or Secretary signature is sufficient in the case of a Company.

Print name of Director signing on behalf of Company and registered as such with the CRO:	
Print name of Secretary Signing On behalf of company and registered as such with the CRO:	
If not a Company, or business name registered to a Company print name of person signing of behalf of business or self:	
Signature 1:	
Signature 2:	
Date:	

#### SECTION 9: IMPRESSION OF COMPANY SEAL - COMPANY NAME CHANGE ONLY

Make Seal impression within this box	Please make an impression of the common seal of the Company in this box. Please note the impressed Company seal must match the named Company as per CRO listings, a Rubber Stamp version is <u>not</u> acceptable.
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## MILK HYGIENE DIVISION CONTACT INFORMATION

Please note, the signed original form must be submitted to Milk Hygiene Division. Scanned, photocopied and/or digital versions of the form are not accepted.

