



## Agent Application to register as sub-contractor for ACRES

**To be completed by the agent. All fields are mandatory Please use Block Capitals.**

**Personal Details**

**Personal Public Services Number (PPS No)**

        

Format of PPS No is 7 numbers followed by 1 or 2 letters as printed on any correspondence from the Revenue Commissioners or Department of Social Protection.

**Title:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Surname:** \_\_\_\_\_

Agent Identifier AGT \_\_\_\_\_

**Farm Advisory System (FAS) Approved**

Are you Farm Advisory System (FAS) approved?  Yes  No

**Agency details**

**Name of agency that you are subcontracted to** \_\_\_\_\_

Please ask the manager of the agency to complete the form overleaf.

I wish to apply to the Department of Agriculture, Food & the Marine to be granted the authority to subcontract to the agency listed above in respect of Agri Climate Rural Environmental Scheme (ACRES)

*I acknowledge that the data to which I will have access is confidential and is covered by current Data Protection legislation and Regulation (EU) No 2016/679 (General Data Protection Regulation) effective from 25 May 2018. I understand that this information is made available to me for the purposes of submitting application forms online on behalf of my clients for the Schemes indicated above. I undertake to use the information solely for the purposes for which it is intended and not to disclose it to third parties. I confirm that I will keep my log-on details confidential and will not disclose them to a third party. I agree to indemnify the Minister for Agriculture, Food and the Marine from any losses, damages, liabilities, costs and expenses (including necessary legal expenses) arising out of injury, loss or damage to any person whatsoever, resulting from or in any way connected with or arising out of the use of the Department's Single Sign On System or the use of any data provided by the Department by whatsoever means by myself, my servants or agents. I confirm that the information on this form is correct to the best of my knowledge and that it refers to me. I hereby declare that I am aware of the attached Terms and Conditions pertaining to this application and agree to comply fully with these requirements.*

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return this form by email to  
[acres@agriculture.gov.ie](mailto:acres@agriculture.gov.ie) or to  
ACRES Section,  
Department of Agriculture, Food & the Marine  
Johnston Castle Estate,  
Wexford, Co. Wexford.  
Y35 PN52

If you have any queries in relation to the form, please contact this unit at **(053) 9163425**

**Department of Agriculture, Food & the Marine Agriculture Agency Details**

*This section is to be completed by the Company Manager.*

**Please quote your Agriculture Agency Number and Agency Name.**

**Agriculture Agency Number: AGY** \_\_\_\_\_

This will have been issued to you by the Department of Agriculture Food & the Marine if your company has already been registered as an Agriculture Agency.

**Agency Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Telephone No:** \_\_\_\_\_ **Mobile No:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Please complete tick boxes below:**

I confirm that this agency has Professional Indemnity Insurance.

Please indicate if your agency's Professional Indemnity Insurance applies  **or** the Professional Indemnity insurance of the sub-contractor.

I agree to notify the Department when an agent ceases subcontracting.

**Declaration. You must complete this panel.**

*I acknowledge that the data to which the agency will have access is confidential and is covered by the Data Protection Acts 1998 and 2003 and the General Data Protection Regulation effective from 25 May 2018. The agency understands that this information is made available to it for the purposes of submitting application forms online on behalf of its clients for the Schemes indicated above. The agency undertakes to use the information solely for the purposes for which it is intended and not to disclose it to third parties. I confirm that the agency will keep all log-on details confidential and will not disclose them to a third party. The agency agrees to indemnify the Minister for Agriculture, Food and the Marine from any losses, damages, liabilities, costs and expenses (including necessary legal expenses) arising out of injury, loss or damage to any person whatsoever, resulting from or in any way connected with or arising out of the use of the Department's Single Sign On System or the use of any data provided by the Department by whatsoever means by the agency, its servants or agents. I confirm that the information on this form is correct to the best of my knowledge and that it refers to the agency. I hereby declare that I am aware of the attached Terms and Conditions pertaining to this application and the agency agrees to comply fully with these requirements.*

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Position held in Company** \_\_\_\_\_

**Company Stamp or Seal**



## Data Protection Notice

General Data Protection information applicable to all Department of Agriculture, Food and the Marine customers is available at -

<https://www.gov.ie/en/organisation-information/ef9f6-data-protection/>

### Information specific to the personal data being collected on DAFM ACRES subcon:

**1. Specified Purpose:** The personal data sought from you is required to enable you register as an Agriculture Agent with the Department of Agriculture, Food and the Marine for the purpose of accessing DAFM On-Line Services on behalf of clients and submitting applications to the Department on behalf of clients for the scheme(s) selected on this form or future applicable schemes.

**2. Legal Basis:** The legal basis for processing this personal data is Article 6(1) (c) of Regulation (EU) 2016/79 of the European Parliament and of the Council of 27 April 2016 (the General Data Protection Regulation) i.e. processing is necessary for compliance with a legal obligation to which the controller is subject.

**3. Recipients:** Information provided on this form will be shared with other Business Areas within the Department for the purposes of processing applications in a timely and efficient manner. The Department is also currently obliged by law to provide information concerning applicants in response to requests received from the Office of the Revenue Commissioners, An Garda Síochána and other bodies in accordance with current Data Protection legislation.

**4. Transferred outside the EU:** Information is not transferred outside the EU.

**5. Retention Period:** The data submitted will be retained by DAFM only as long as there is a business need to do so in line with the purposes for which it was collected. It will then be marked for destruction and will be destroyed in line with internal guidelines or guidelines for destruction received from the National Archives Office or associated permissions received from them.

**6. Data Provision being statutory or contractual obligation:** The data provided for this purpose is in line with our statutory obligations and with current Data Protection legislation. The legal basis for each of the schemes is outlined in the Terms and Conditions of that scheme. Failure to provide all the personal data required will result in DAFM being unable to register you as an agriculture agent and you will not be in a position to access DAFM On-Line Services or submit applications on behalf of your clients.

**7. Automated Decision Making:** Data is not processed automatically.

**8. Information from Third Party:** N/A

**9. Technical Information on data collected:** Technical information on the cookies used on the Gov.ie website is available at <https://www.gov.ie/en/help/privacy-policy/?section=cookies>.