

# Classification of a live bivalve mollusc production or relaying area: application form

This form should be used to apply for a new live bivalve mollusc (LBM) production or relaying area or for amendments to an area already classified, i.e. zone boundary or monitoring point adjustment or new species. Sanitary surveys are required for all new production areas or new species in existing areas prior to the FSA designating a provisional classification, a legal requirement under EC Regulation 2019/627.

Please allow a minimum of 16 weeks from the date of application submission. This includes the Local Enforcement Authority (LEA) undertaking sampling, 10 samples at least a week apart, towards possible classification, depending on LEA availability and practicalities of sampling.

Failure to participate within the required timescales may result in delays to issuing a classification and commencement of commercial harvesting of LBMs. The FSA will verify and approve applications before committing to public expenditure.

| Please note that the classification of an LBM harvesting area does not confer the right to harvest. Permissions may also be required from other bodies (e.g. IFCAs, Natural England, Natural Resources Wales, Crown Estate, landowner). It is the responsibility of the applicant to obtain these. You can find [further information about appropriate harvesting licences](http://www.seafish.org/industry-support/aquaculture/aquaculture-regulatory-toolbox-for-england) on the Seafish website.  **Please complete this form and submit electronically and refrain from completing by hand. Hard copies will not be accepted.**  Submit to [shellfish@food.gov.uk](mailto:shellfish@food.gov.uk) for England and [lasupportwales@food.gov.uk](mailto:lasupportwales@food.gov.uk) for Wales.  Incomplete or incorrectly completed forms may be rejected until the information necessary to progress has been provided. **Please ensure you submit all relevant information for the area.** |
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## Application process

| Harvester and LEA  1. Preliminary requirements before application - engage with your LEA, consider effective site selection, consider pre-classification investigative monitoring. |
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| FSA  1. Receives application and map from LA - subject to verification and approval |
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| Contractor  1. Undertakes sanitary survey assessment which determines sampling plan |
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| Contractor  1. Agrees sampling plan with LEA |
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| FSA  1. Confirms sampling plan with Cefas for coordination of sampling programme |
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| LEA and Cefas  1. New classification - 10 samples min. a week apart towards provisional classification |
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| FSA  1. Makes decision on classification - harvesting commencement is considered |
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## Local Enforcement Authority’s details

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| Name of EHO/Officer supporting application | Click or tap here to enter text. |
| Local Authority | Click or tap here to enter text. |
| Address and postcode | Click or tap here to enter text. |
| Telephone No | Click or tap here to enter number. |
| Email address | Click or tap here to enter text. |

**By submitting the application, the LEA as the Competent Authority, in applying for the FSA to consider classifying an area, is acknowledging the work and cost needed to achieve this, in particular implementation of the sampling plan and is supportive of the harvester’s application.**

This will involve:

* LEA routine official control sampling for microbiological, biotoxin and phytoplankton monitoring
* review and implementation of the recommended sampling plan
* review of draft sanitary survey report during consultation
* assistance during a shoreline survey if required

## Details of site location

**What is this site to be used as?**

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| Production Area? |  |
| Relay Area? |  |

**Detail the perimeter of the proposed area, type of map included, OS 1:25,000, OS 1:50,000 or Admiralty chart,** in either 8 figure Ordnance Survey grid referencesor Latitude/ Longitude in degrees and decimalised minutes format:

| Click or tap here to enter text. |
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## Details of proposed operation and Official Control monitoring

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| **Shellfish species** | **Please tick** | **Wild / Farmed** | **Method of Growth** | **Harvesting Method** | **Harvesting Months**  Incl regular periods of no harvesting e.g. spawning/IFCA Byelaw |
| Mussel (Mytilus spp.) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Native oyster (Ostrea edulis) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Pacific oyster (Crassostrea gigas) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Hard shell clam (Mercenaria mercenaria) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Thick trough shell (Spisula solida) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Manila clam (Tapes philippinarum) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Native clam or Palourde (Tapes decussatus) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Cockle (Cerastoderma edule) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Razor clam (Ensis spp.) |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Other: [Please specify] |  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| **Detail of production timescale**: please allow a minimum of 16 weeks from the date of application submission  Click or tap here to enter text. |

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| **Details (name of bed(s), bed ID and species) of any existing classified sites in the proximity of proposed area:**  Click or tap here to enter text. |

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| **Detail if shellfish stock for the species in this application is likely to attain the statutory minimum landing and sampling/analysis size** before the date by which classification is required:  Click or tap here to enter text. |

| Further information on statutory minimum size can be obtained from Inshore Fisheries & Conservation Authorities (IFCAs), Environment Agency and Welsh Government. |
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| **Provide detail on how the LEA will undertake the ongoing official control monitoring** for E.coli, Biotoxins and phytoplankton and provide resource to sustain classification including ongoing sampling and accessibility and practicality of sampling:  Click or tap here to enter text. |

## Other permissions required before proceeding

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| Provide details of **other regulations or controls** the shellfishery is subject to (e.g. Several Order, Regulating Order) that would prevent sampling or harvesting, or provide evidence that the shellfishery is private with exclusive rights to harvest. | Click or tap here to enter text. |
| Provide evidence of the **necessary permissions** obtained (e.g. planning permissions from Crown Estate) to harvest shellfish in the area for potential classification. | Click or tap here to enter text. |
| Provide details of any **stock management** / conservation Byelaws or similar applied to the area for potential classification (e.g. closed seasons, MCZs, firing ranges, no anchorage zones): | Click or tap here to enter text. |
| Provide the last **IFCA/other assessment of stock** survey information, including date of assessment and location of stock for open fisheries (essential for cockle and razor clam applications): | Click or tap here to enter text. |
| Provide details of **known potential pollution/contamination sources**, discharges, marinas, public beaches and harbours and mark them clearly on the map. | Click or tap here to enter text. |
| Provide details of **authorisation from the Fish Health Inspectorate** prior to any developments taking place for the potential classified area including date of application & authorisation number: | Click or tap here to enter text. |

| Aquatic Animal Health (England and Wales) Regulations 2009 states all applicants intending to operate a new shellfish farm are required to apply for authorisation from the Fish Health Inspectorate before any development takes place. |
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| **Anticipated annual production** in tonnes  (if classification is designated): | Click or tap here to enter text. |

| Biotoxin and phytoplankton monitoring is required for classified production areas during periods of harvesting. Two samples of flesh and water for biotoxin and phytoplankton taken a minimum of 7 days apart and results compliant with the regulatory limits are required before any harvesting can commence. |
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## Harvester details [FSA use only]

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| Name | Click or tap here to enter text. |
| Company Name | Click or tap here to enter text. |
| Address and postcode | Click or tap here to enter text. |
| Telephone No | Click or tap here to enter text. |
| Email address | Click or tap here to enter text. |

## Further Potential Applications – Yes/No

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| If **‘YES’**, provide details: | Click or tap here to enter text. |

## Explanatory notes on legal aspects of sanitary survey

Regulation (EC) No. 2019/627 determines that a sanitary survey must be undertaken to inform the contents of the sampling plan for microbiological monitoring. The sanitary survey requirements are:

1. inventory of the sources of pollution of human and animal origin likely to be a source of contamination for the production area;
2. examination of the quantities of organic pollutants which are released during the different periods of the year, according to the seasonal variations of both human and animal populations in the catchment area, rainfall readings, waste-water treatment, etc.;
3. determination of the characteristics of the circulation of pollutants by virtue of current patterns, bathymetry and the tidal cycle in the production area.

## Explanatory notes on data handling and protection

The information requested in this form is to be used for classification purposes and aims to inform the sanitary survey in line with the good practice guidelines provided by the European Union Working Group on the Microbiological Monitoring of Bivalve Mollusc Harvesting Areas.

The information in this form is required by the Food Standards Agency under EC Regulation 853/2004 and will be processed by our contractors on behalf of the Food Standards Agency (FSA).

The Applicant has the right to rectify any inaccurate information provided in this form. The applicant also has the right to request a copy of any information held by our contractors and the FSA and personal data held by the FSA, on the proposed shellfish operation.

The FSA, Carcinus Ltd and/or Cefas may contact the applicant or the Local Authority officer regarding the information provided in this form with the aim of improving the service provided.

The Applicant should note that the information provided in this form may be shared with other Governmental agencies or departments who have shared responsibilities on fisheries or food safety matters.

## The [privacy notice for data relating to sanitary surveys](https://www.food.gov.uk/about-us/privacy-notice-shellfish-sanitary-survey-data) can be access on the FSA website.

In line with the FSA’s openness policy, a final copy of the sanitary survey report will be publicly available. In accordance with the FSA principle of openness we shall keep a copy of the completed targeted consultation regarding the draft report and responses received, to be made available to the public on receipt or a request to the FSA Consultation Coordinator (Tel: 020 7276 8140).

In accordance with the provisions of Freedom of Information Act 2000/Environmental Information Regulations 2004, all information contained in your response may be subject to publication or disclosure. If you consider that some of the information provided in your response should not be disclosed, you should indicate the information concerned, request that it is not disclosed and explain what harm you consider would result from disclosure. The final decision on whether the information should be withheld rests with the FSA. However, we will take into account your views when making this decision.

The form will be held for a minimum of 7 years in line with sanitary survey review requirements.

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