



Register a fishery, cropping water or aquaponic system

You must complete all sections of the form before it will be accepted.

Section 1 - Applicant details

<p>I wish to register a:</p> <p><input type="checkbox"/> Fishery (private or commercial)</p> <p><input type="checkbox"/> Cropping water (eg stock pond)</p> <p><input type="checkbox"/> Aquaponic system</p> <p>I am the:</p> <p><input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Angling club representative</p> <p>Full name</p> <input style="width: 100%;" type="text"/> <p>Position (eg manager, secretary, owner)</p> <input style="width: 100%;" type="text"/> <p>Organisation name</p> <input style="width: 100%;" type="text"/>	<p>Mailing address</p> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <p>Postcode <input style="width: 150px;" type="text"/></p> <p>Contact details</p> <p>Landline <input style="width: 100%;" type="text"/></p> <p>Mobile <input style="width: 100%;" type="text"/></p> <p>Email <input style="width: 100%;" type="text"/></p>
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Section 2 - Site details

<p>Site name</p> <input style="width: 100%;" type="text"/> <p>Site address Tick if same as Section 1 <input type="checkbox"/></p> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <p>Postcode <input style="width: 150px;" type="text"/></p>	<p>National grid reference (NGR)</p> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> <p>Submitting a map</p> <p>You must provide a map if you are registering a fishery or cropping water.</p> <p>This must show the locations and names of the waters listed below. It will be used by the Environment Agency when stocking or removing fish.</p>										

Please list all waters or facilities within the site

Name of water	Size - Hectares(s)	Size - Acre(s)

Please use an additional sheet for more waters

Section 3 - Site species details

Please select all species known to be held at your site

- Unknown (Go to Section 4)
- Crayfish

Coarse fish

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> Barbel | <input type="checkbox"/> Goldfish |
| <input type="checkbox"/> Bream | <input type="checkbox"/> Gudgeon |
| <input type="checkbox"/> Carp - Common | <input type="checkbox"/> Orfe |
| <input type="checkbox"/> Carp - Crucian | <input type="checkbox"/> Perch |
| <input type="checkbox"/> Carp - Grass | <input type="checkbox"/> Pike |
| <input type="checkbox"/> Carp - Hybrids | <input type="checkbox"/> Roach |
| <input type="checkbox"/> Carp - Koi | <input type="checkbox"/> Rudd |
| <input type="checkbox"/> Catfish (Wels) | <input type="checkbox"/> Sturgeon |
| <input type="checkbox"/> Chub | <input type="checkbox"/> Tench |
| <input type="checkbox"/> Dace | <input type="checkbox"/> Zander |
| <input type="checkbox"/> Eel | |

Salmonid fish

- | | |
|--|--|
| <input type="checkbox"/> Arctic char | <input type="checkbox"/> Trout - Brown |
| <input type="checkbox"/> Salmon - Atlantic | <input type="checkbox"/> Trout - Rainbow |
| <input type="checkbox"/> Trout - Brook | <input type="checkbox"/> Trout - Tiger |

Additional comments

Please use this space if you wish to add any additional comments about your application

Section 4 - Signature

By signing I confirm that to the best of my knowledge and belief the information I have given is correct and complete, and that I will:

- notify the FHI in advance of any changes to the above information within 90 days of the change
- provide the FHI with all reasonable help and access in discharging their duties
- notify the FHI if a listed disease is suspected or present at my site, or if there is an increase in animal mortalities

Signature

Full name

Date signed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year			

Please send your completed form and map by email or post to:

Address: Fish Health Inspectorate, Cefas, Barrack Road, Weymouth, Dorset, DT4 8UB
 Email: fhi@cefas.co.uk

Applications may take up to 15 working days to process.

Data is collected for aquatic animal health control and biodiversity purposes.

We may share your information with other government departments and agencies that have shared responsibility for the environment.

You are entitled to a copy of the information we hold about you and you have the right to rectify any inaccurate information that we may hold.

Internal use only

Map Certificate Date sent

Initials Site code