



Registration of FARM ADVISORY SERVICE

APPLICATION FORM

IMPORTANT

Please read the accompanying Guidelines for Registration of Farm Advisory Service, before completing this Application Form.

The information you provide in your application form will be used to check the eligibility for registration. If there is insufficient space to answer any question please continue on a separate sheet and attach it to your Application Form.

Applicants are to check that **all** necessary supporting documents are submitted together with this form. Following submission, the Agricultural and Rural Payments Agency reserves the right to request additional information. The Applicant has 15 calendar days from the receipt of the notification to submit the requested information for the Application to remain valid. Only Application Forms submitted by hand will be accepted. An administrative fee of €20 should be enclosed with the application.

Please complete this document in block letters or typed format.

Should you have any queries with the compilation of this form please contact the FAS Registrar, Agricultural and Rural Payments Agency, Luqa Road, Qormi, by email on martin-matthew.farrugia@gov.mt.



SECTION 1 - Details

1.1a Details of proposed FAS entity.

| | |
|-----------------------------|--|
| Name of entity | |
| Address | |
| Fixed Line Telephone Number | |
| Email Address | |
| Company Registration Number | |
| VAT number | |

1.1b Details of proposed FAS representative.

| | |
|---|--|
| Title (Mr/Mrs/Ms/other please state) | |
| First Name and Surname | |
| Date of Birth | |
| Address | |
| ID Card/Passport Number | |
| Fixed Line Telephone Number | |
| Mobile Telephone Number | |
| Email Address | |
| VAT Number | |



1.2 Contact details of person to be contacted regarding the application

(If different from 1.1b above).

| | |
|--|--|
| Title: (Mr/Mrs/Ms/other please state) | |
| First Name & Surname | |
| Position within the enterprise | |
| Address | |
| ID Card/Passport Number | |
| Fixed Line Telephone Number | |
| Mobile Number | |
| Email Address | |

1.3 Resources

Please provide details of the staff engaged within the organisation.

| Human Resources | Quantity |
|--|----------|
| Managerial | |
| Administrative | |
| Professional | |
| Field workers | |
| Others (<i>please specify</i>) | |



1.3(a) Details of Human Resources

| Name & Surname | I.D. | Level | Role ¹ | Level of Education | Area of Expertise | Actions covered ² |
|----------------|------|-------|-------------------|--------------------|-------------------|------------------------------|
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¹ Managerial, Administrative, Professional, Technical

² Refer to guidelines Table 1 to indicate the category of actions covered by the professional/field worker.



1.4 Facilities

| Present Assets | Availability | |
|---|------------------------------|-----------------------------|
| | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| ICT hardware and software | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Office ware | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Reference materials including library, archive, and catalogue materials | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| On-site (field and farm) instruments for analysis, monitoring, etc. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Own Laboratory facilities ³ | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Own financial capacity to operate | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Training plan pertaining to members of the FAS entity | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Training plan pertaining to the FAS clients | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Other Please specify | | |

1.4(a) Details of Laboratory Services

| Name (of subcontracting laboratories) | Address (of subcontracting laboratories) | Types of services provided |
|--|---|----------------------------|
| | | |
| | | |
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³ If the FAS entity does not have its own laboratory facilities, please indicate the details of the subcontracting laboratories.



SECTION 2 - Supporting Documentation

Supporting documentation required with regard to the application:

- Copy of Identity Card of person representing enterprise;
- Recent Memorandum of Association;
- Curriculum Vitae together with a transcript of the credits of the core experts;
- VAT certificate;
- An administrative fee of €20.

| | | | |
|--|------------------------------|-----------------------------|------------------------------|
| Copy of Identity Card of person representing enterprise. <i>(Photocopy of ID card should be attached)</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Statute/Memorandum of Articles of Association or Equivalent Legal Act Submitted <i>(Photocopy of Official Document should be attached)</i> <i>(Compulsory in case of Producer Groups/Organisations/Associations or Farmers' Cooperatives)</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Vat Certificate <i>(Photocopy of Official Document should be attached)</i> <i>(Compulsory for all Applicants and Cooperation Actors involved in an Economic Activity)</i> | Yes <input type="checkbox"/> | | N/A <input type="checkbox"/> |
| Curriculum Vitae together with a transcript of the credits of the core experts <i>(Compulsory for all experts / technicians engaged with the entity)</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Declaration from certified auditor confirming that the entity have the financial capabilities to provide the service. <i>(Compulsory for all Applicants)</i> <i>(Original Auditor's Signed Declaration)</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Administrative fee of €20 <i>(Compulsory for all Applicants)</i> | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |



SECTION 3 – Declarations

- I certify that the entries in this form and any other attachments enclosed are, to the best of my knowledge and belief, correct.
- I declare that there is no conflict of interest with the clients and that the advisory officials who provide advice to the clients do not have the same evaluating status as its clients.
- I take full responsibility of all the information provided and services rendered to the clients by the personnel.
- I confirm that to my knowledge the experts and technical staff are not engaged with any other FAS entity.
- I confirm that the entity have sufficient human resources to provide advisory service to farmers.
- I will follow advice and recommendations given by the Ministry for Sustainable Development, Environment and Climate Change (MSDEC), and ensure that correlated work is not re-diverted to, or requested from the MSDEC.
- I report within 10 days any changes to client data, records or status changes.
- I will not disclose personal or individual information that would have been obtained through advisory activity other than the farmer managing the holding concerned, except in cases of irregularities or infringements found during their activity that is covered by a legal obligation to inform a public authority.
- I will comply with or accept any changes to the commitments, undertaken in accordance with these regulations that may be necessary as a result of European Union or national legislation on the European Agricultural Fund for Rural Development.
- I confirm that should I be recognised as a farm advisory service provider, I am obliged to keep records about the activities and information about the services rendered to their clients.
- I commit to timely pay the yearly renewal fee of €30 by the 1st of December of every year.
- I must compile and maintain a status report for each farmer and submit a status report as specified in the guidelines provided by the Agricultural and Rural Payments Agency by not later than the 1st June and the 1st December of each year.
- I allow access to the land/buildings and documentation to any authorised person for the purpose of carrying out an inspection in order to verify the accuracy of the information in this application.
- I will provide any further information as may be required by all stakeholders within the Ministry for Sustainable Development, Environment and Climate Change (MSDEC) and Government entities, as well as other officials appointed by the Government to carry out audit checks controls and evaluations.
- I am aware that if provide wrong information or otherwise acts in a deceitful or fraudulent manner, for the purpose of obtaining the certificate of registration, I shall be guilty of an offence and shall, on conviction be liable to a fine not exceeding two thousand and three hundred and twenty nine Euros (€2,329).
- I understand that if the application is not complete in all relevant detail and every aspect, including this section, it may be rejected.



| | |
|------------------------|--|
| Name in Block Letters: | |
| Position Held: | |
| Signature: | |
| Date: | |

Statement to be certified and stamped by a qualified accountant/auditor

This is to certify that _____(insert name of entity)
as at ____/____/____(dd/mm/yy) has the financial capability to operate as a service provider.

Name _____

Signature _____

Date _____



Note:

Part or all the information you provide will be held on a computer system and will be used for the processing of applications and producing monitoring reports. The Agricultural and Rural Payments Agency can verify this information with other government departments, as well as with other Agencies and other bodies according to the laws, including those of the European Commission, so that misleading or inaccurate information is known and discarded, and/or to reveal any criminal activity, and also to coordinate the process of any other applications in the field of agriculture.

The Agricultural and Rural Payments Agency carries out its functions under all relevant regulations of the European Commission and local policies. This application along with accompanying documents will be kept confidential and will be processed in conformity with the Data Protection Act (Cap 440). Personal Data may also be disclosed to the Ministry for Sustainable Development, Environment and Climate Change and other line departments within this Ministry for the administration of agricultural policies. You have the right to ask about the personal data being processed about you in accordance with the Agricultural and Rural Payments Agency's Privacy Policy, a copy of which can be sent to you if requested.

The Ministry for Sustainable Development, Environment and Climate Change has the right to publish the names of the entities registered as Farm Advisory Service Providers.

Please return your completed application form along with the necessary documentation by hand to:

*Agricultural and Rural Payments Agency
Front Office
Pitkali Markets
Ta'Qali L/O,
Attard*

For official use only:

Acknowledged by:

Date: ____/____/____