

Department of Agriculture, Fisheries and Food

2008 Single Payment Scheme

Declaration of Undertaking (in accordance with Article 74 of EU Commission Reg. 796)

This form is to be completed where an entire holding is transferred from one farmer to another between date of application for the Single Payment Scheme and 31/12/08 where the transferee agrees to succeed to the responsibilities of the transferor.

Details relating to original applicant under the Single Payment Scheme (transferor of entitlements)

Herd Number:

NAME: _____

ADDRESS: _____

Date of Birth ____/____/____

TEL NO: _____ MOBILE: _____

Date of Transfer of Entire Holding _____

Date of application for 2008 Single payment scheme ____/____/____ Number of entitlements claimed _____

Number of entitlements to be transferred _____ Value of entitlements to be transferred _____

Is the entire holding being transferred: Yes No Is the transferor deceased: Yes No

Signature of transferor (or if deceased signature of legal representative) : _____

Please indicate method of transfer (tick box): Inheritance Gift Sale Lease Other

If other, please specify: _____ Date of transfer: ____/____/____

Details relating to the transferee:

Herd Number:

NAME: _____

ADDRESS: _____

Date of Birth ____/____/____

TEL NO: _____ MOBILE: _____

Are you already an applicant under the 2008 Single payment scheme (please tick box) Yes No

DECLARATION OF 2008 UNDERTAKING (must be signed by transferee)

Declaration: I, the transferee, agree to succeed to the responsibilities of the original applicant regarding compliance with the terms and conditions of the 2008 Single Payment Scheme and I wish to apply for payment under the Scheme. I hereby declare that I have read and understand the Terms and Conditions of the Single Payment Scheme and agree to be bound by them. I declare that the information given in this application is complete and accurate in all respects.

Signature of transferee

(in applicants normal handwriting)

Date:

THIS FORM MUST BE ACCOMPANIED BY A 2009 TRANSFER OF ENTITLEMENT APPLICATION FORM