

File No:

CROFTING CATTLE IMPROVEMENT SCHEME APPLICATION FOR YEAR 2018/2019

- Before completing this form, you should read the attached Scheme Guidance Notes. PLEASE
 USE BLOCK LETTERS THROUGHOUT
- Completed forms should be returned to the address below by 18th January 2019

	SGRPID reserves the right to inspect the bull and the pube notified at once of any change of custodian.	premises in which it is housed at any time.	They should also						
1	Name of Township/Group:								
2	Applicant's name: (Mr, Mrs, Miss, Ms)								
3	Applicant's status: (ie. Clerk of Grazings Committee/Grazings Constable, Secretary/Representative of Group)								
4	Please state Parish County Holding (CPH) Number for Grazings/ Group	1 1							
5	Postal address to which communications should be sent:								
			70000						
6	Daytime telephone number of clerk, secretary, Constable or representative (including STD Code) and/or mobile number:								
7	Name of Custodian: NB: Custodian must be under 70 years of age		Date of Birth / /						
8	Address of Custodian:								
9	Parish County Holding (CPH) Number of Custodian:	1 1							
10	Daytime telephone number (including STD Code) and/or mobile number of custodian								
11	Please indicate below the Townships/Groups sharing use of bull:								
		Number of Members in Township/Group owning stock for service	Number of Member's Stock to be served (cows and heifers)						
	PARENT TOWNSHIP/GROUP AS AT ITEM 1 ABOY ASSOCIATE TOWNSHIPS (if applicable)	/E							
	1.								
	2.								
	3.								
	1.4								

12	(plea Plea at an	Number of Bulls applied for: (please tick appropriate box) Please note that the maximum number of cows and heifers put to an individual bull must not exceed 40 at any one time. Anything in excess of this has a significant effect on the bulls performance and may rein a number of cows proving not in calf, which could result in financial implications for you.										
		ds of bull de	esired:] and al								
	1⁵ C	choice(s)				2 nd Cho	DICE(S)					
					.	1						
]						
13	Appr	oximate dat	e of delivery	desired:								
14		o you intend to return the bull to the Stud Farm for wintering? Yes No ick appropriate box)										
	If no, please provide your Committee/Group's details for alternative wintering arrangements. All alternative arrangements will have to be approved by SGRPID											
15 DECLARATION												
	i		re that I am authorised in the capacity specified in item 3 overleaf to act on behalf of the ip/Group specified in item 1 overleaf and hereby apply to SGRPID for the supply of a bull(s) on hire.									
	ii	I confirm ti	hat I have rea	id and under	stood the con	ditions se	et out in	the Gu	idance	Notes t	or the S	cheme.
	iv	the case may be, I and every member of the Group or Grazings Committee for the Township specified in item 1 overleaf, and my and our successors in the relevant capacity, shall be bound or shall be taken bound (a) to pay to the Scottish Government all charges, fees and expenses which may be payable in terms of the Scheme; (b) to observe and fulfill all the conditions of the Scheme; and (c) to indemnify SGRPID in respect of all actions, claims, losses or expenses made against or incurred by the Division in respect of loss or damage or personal injury arises by reason of our negligence or otherwise.										
Signa	ature				anar-2014 / 11- 12			145-18				
							1100	on transc				
Date												
		WARNING										
		Failure to ensure that the information provided on this application form is accurate in material respects, or failure to comply with the Conditions of the Scheme will result in SGRPID refusing to supply further bulls under the Scheme										
				F	OR OFFICIAL	USE ON	_Y					
Decis	sion: _			_ No. of B	ulls:	Bree	ed(s):					
Authorising Officer:					_ Date	:						