Rural Payments and Inspections Registering a Business Form Guidance Notes



You can use this form to:

- register a business so you can apply for funding, register a new location or keep livestock
- re-register an existing business
- · make changes to any of the information you have given us
- split and merge businesses you should complete a separate form for each new business or for the updated and closed business

Please make sure that you complete all the relevant parts of the form to confirm all of your details and information.

You will need to re-register your business with us. If you have not done this, you need to do it now. If you do not, this may lead to delays processing your applications and delay any payments that become due. Even if you have previously registered with us you need to re-register with our new system. However, you only need to do this once.

You can choose to register your business or maintain your information online at the Rural Payments and Services website https://www.ruralpayments.org

If you are applying for funding, the Responsible Person has to be a business member. You will need to tell us your preferred communication address.

The new online service provides:

- easy to follow scheme guidance and information
- jargon-free language and no unexplained acronyms
- better help and search tools
- the ability to make changes quickly and easily
- up-to-date map information
- · notifications of updates to your account
- secure information and communications
- access to all your information online

How to fill in this form

Please do:

- use black ink and CAPITAL letters to fill in the boxes
- put a cross (X) in the right boxes
- leave boxes blank if they do not apply to you

Please do not:

- use correcting fluid if you make a mistake, please cross it out and write underneath
- send us an incomplete form if you do, we will send it back to you and this will delay your registration

Information you will need to complete this form

If you are applying for funding:

- your full name, date of birth and National Insurance number
- the full name, date of birth and National Insurance number for any other business m embers
- if your business is Cross Border, you will also need your Single Business Identifier (England), business Identifier (Northern Ireland) or Customer Reference Number (Wales) (if known)
- the Charity Number, if your business is a registered charity
- the Companies House registration number, if your business is registered with Companies House

If you are registering a location:

- details of the Main Location Code, including the name and grid reference information
- the date you started occupying the location
- the County Parish Holding (CPH) number of the location (if known)
- the name of the previous occupier (if known)
- the area of the location total owned and/or rented

If you are keeping livestock:

the type of livestock

If you are going to appoint an agent:

you will also need to complete a PF05 - Business mandate form

If you need help completing this form, please go to https://www.ruralpayments.org or call your local area office.

You can find contact information and a list of all the phone numbers at https://www.ruralpayments.org

'Business' means a person or group of one or more persons which operates together for a particular purpose, and needs to be registered on our system in order to interact with RPID.

'Responsible Person' means the person who acts as the principal person of responsibility, and key contact for the business. There will be only one Responsible Person listed for any given business, and that person must be a member of the business.

'Business Representative' means individual/s who may have close links with the business and who is mandated to represent the business in their dealings with RPID.

'Advisory firm' means an organisation which may be mandated to represent the business in its dealings with RPID.

If you are completing this form to apply for funding, you should also complete a bank account form (Sterling – PF03 or Euros – PF04).

If you are completing this form to update your land/location details, you should also complete a PF06 - Land maintenance form.

If you are completing this form to assign an advisory firm or Business Representative, you should also complete a business mandate form (PF05).

If there are more than four business members you should also complete an additional business members form (PF02).

Business types

Sole trader: A business with one owner

Partnership with separate legal personality: A business with a formal partnership agreement under Scots Law (the owners are legal persons)

Partnership without separate legal personality: A business with a formal partnership agreement not under Scots Law (the owners are not legal persons)

Limited Liability Partnership: A partnership registered with Companies House as a limited liability partnership

Registered Company: A company which is registered with Companies House whether with liability of its members unlimited or limited whether by shares or by guarantee

Scottish Charitable Incorporated Organisation: A charitable organisation operating on a business basis and which is registered as a Scottish Charitable Incorporated Organisation with the Office of the Scottish Charities Regulator

Trusts: A business that is the subject of a trust and is being managed by a trustee on behalf of the beneficiaries of the trust

Other: Any other kind of business

(Form PF01) Revised 11/04/16

Rural Payments and Inspections registering a business form



For official use only	Date stamp	
Business Reference Number		
If you already have a Main Location Code a these details in the boxes below.	and/or Business Reference Number please p	rovide
Main Location Code	CC/PPP/HH	НН
Business Reference Number:		
About the registration		
Please tell us why you are registering a bu	usiness by crossing all the boxes that apply.	
Registering a business for the first time		X
Re-registering a business		×
If you are intending to apply for funding, now You will also need to complete a BACS form.	or in the future	X
Registering a location You are registering land for the first time or taking occupancy	y of an existing location on a permanent basis.	X
Keeping livestock You are keeping livestock for the first time.		X
To maintain information you have already sub	omitted	X
If you are completing this form to register a lo for funding, we will need more information at	ocation or to keep livestock and you later decide t that time.	o apply
If there are more than four business members complete the additional business members for		X
If you are keeping or planning to keep livestoo On a permanently occupied holding, including		X
On an employer's holding		X
On seasonally rented land, less than 365 day	/S	X

Part 1 – About the business

We use the term 'business' to describe all our customers. Please put your business name or the name you are known by, even if you do not consider yourself a business.

1.1 – Name, address a	and contact information		
Business name			
If you are applying for fun	nding, you need to give us	more informati	on about the business.
Business start date			
Is the business registered	for VAT purposes?		Yes 🔀 🛛 No 🔀
Please cross ONE of the	boxes below to tell us the	business type:	
Sole Trader Partnership with separate legal personality	 Partnership Corporation 	\mathbf{x}	Other groups without separate legal personality
Registered Company	Scottish Charital		Groups/associations of legal persons
If other, please give more		Janua	Trusts
			Other
If the business is a registe	ered charity, what is the C	harity Number?	
•	ed with Companies House ouse registration number?		XXXXXXXX
If in the UK:	If not in the UK:	Telephone nu	mber (including STD code)
Postcode	Country		
		Mobile numbe	۲ ۲
Business address		Email address	
Line 1			9
Line 2			
Postal Town			
Line 5		Fax number	
L			
Which RPID area office w	vill be your primary office?		
Does the business also o	perate in England, Northe	ern Ireland or W	ales? Yes 📉 No 🔀
		lf yes, plea	ase also complete Part 1.2 below.

If no, go to Part 2.

1.2 – Cross Border information

If the business also operates in England, Northern Ireland or Wales, you need to tell us the Cross Border information for the business.

Please cross the boxes of the countries the business also operates in and fill in the reference number (if known.

England	Single Busine	ess Identifier	XXXX	
Northern Ireland	Business Ide	ntifier	X	
Wales	Customer Re	ference Number	X - X X	
Please indicate which	h country is your paying cou	untry.		
Scotland	England	Northern Irela	and 🔀	Wales 🔀
Part 2 – Aboı	ıt you			
You are the Respons	sible Person. You are the ma	ain point of contact f	or the business	i.
2.1 – Name, addre	ess and contact information	on		
Mr Mrs Ms	Miss Other			
Middle name(s)		7		
Last name		_		
Is your address/conta the business address	act information the same as s? Yes 🔀 No 🔰			
If in the UK: Postcode	If not in the UK: Country	Telephone num	ber (including S	TD code)
		Mobile number		
Address				
Line 1		Email address		
Line 2 Line 3		-		
Postal Town		Eav number		
Line 5		_ Fax number		

2.2 – More information about you

If you are applying for funding, you need to give us more information.

Relationship Partner	to Business Director	Trustee	Executor	Do you have a financial interest in any other rural business in the UK that is claiming funding? Yes X No X
Sole Trader	Chairman	Other		Business name Relationship with this business
If other, plea	se give more	details		
				Country and reference number of this business
Gender Male	Female	Prefer	not to say	Does the business submit a separate Single Application Form (SAF)? Yes X No X
Date of birth You must be	16 years or c	M YYY over.		Business name
National Insu	urance Numbe	er 🗙 - 🗙		Relationship with this business
Tell us why y number.	vou do not ha∖	/e a National	Insurance	
				Country and reference number of this business
				Does the business submit a separate Single Application Form (SAF)? Yes No

If you have additional financial interests in any other rural business in the UK, please complete the continuation page at the back for this form.

Part 3 – Communication

Tell us which details to use when we need to contact you.

If your preferred address is the address of the Responsible Person please cross this box

If other, please complete the information below.

If in the UK:	If not in the UK:	Telephone number (including STD code)
Postcode	Country	
		Mobile number
Address		
Line 1		Email address
Line 2		
Line 3		
Postal Town		Fax number
Line 5		

You can register online at https://www.ruralpayments.org

Part 4 – About the other business members

A business member is a person who has a financial interest in the business.

Other than you, the Responsible Person, does the business have any other business members?

Yes	X	No	X
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If yes, please complete Part 4.1 below for each additional business member. If you have more than three additional business members, please include an additional business members form (PF02).

If no, go to Part 5.

4.1 – About the business member	
Mr Mrs Ms Miss Other	Please tell us why the business member does not have a National Insurance number.
First name	
Middle name(s)	
Last name	Does the business member have a financial interest in another rural business in the UK that is claiming funding?
Relationship to business	Business name
Partner Director Trustee Executor	
	Relationship with this business
Sole Trader Chairman Other	
	Country and reference number of this business
If other, please give more details	
	Does the business submit a separate Single
	Application Form (SAF)? Yes X No X
Gender	
Male Female Prefer not to say	If this business member has a financial interest in another rural business, please complete the
× × ×	continuation page at the back of this form.
Date of birth DD MM YYYY	
National Insurance Number	

4.2 – About the business member	
Mr Mrs Ms Miss Other	Please tell us why the business member does not have a National Insurance number.
First name	
Middle name(s)	
Last name	Does the business member have a financial interest in another rural business in the UK that is claiming funding?
Relationship to business	Business name
Partner Director Trustee Executor	
	Relationship with this business
Sole Trader Chairman Other	
	Country and reference number of this business
If other, please give more details	
	Does the business submit a separate Single Application Form (SAF)?
	Yes X No X
	If this business member has a financial interest
Gender	in another rural business, please complete the
Male Female Prefer not to say	continuation page at the back of this form.
X X X	
Date of birth DD MM YYYY	
National Insurance Number	

4.3 – About the business member					
Mr Mrs Ms Miss Other	Please tell us why the business member does not have a National Insurance number.				
First name					
Middle name(s)					
Last name	Does the business member have a financial interest in another rural business in the UK that is claiming funding?				
Relationship to business	Business name				
PartnerDirectorTrusteeExecutorImage: Section of the section of th	Relationship with this business				
Sole Trader Chairman Other Image: Chairman Image: Chairman Image: Chairman	Country and reference number of this business				
GenderMaleFemalePrefer not to sayImage: Second seco	Does the Business submit a separate Single Application Form (SAF)? Yes X No X				
Date of birth D M Y National Insurance Number X X	If this business member has a financial interest in another rural business, please complete the continuation page at the back of this form.				

Please put a cross here if you have included an additional business members form (PF02)

Part 5 – About the livestock

Livestock details must be declared during registration if you keep or intend to keep animals. These details are passed to the Animal and Plant Health Agency (APHA) and they will be in touch with you soon after registration. If you are keeping livestock for the first time you need to tell us what types of livestock that is, by crossing the boxes that apply below.

Types of livestock			
Alpacas	X	Llamas	X
Bees	X	Pigs	X
Cattle	X	Poultry	X
Deer	X	Sheep	X
Goats	X	Other	X
Horses	X		

If other, please give more details

Part 6 – About the location

If you are registering land for the first time or if you are taking occupancy of an existing location, you need to tell us about the location.

Do you have a Location	Code?		Yes 🔀	No 🗙
If yes, what is the Main L	ocation Code number o	of this land?		
Location name				
Previous occupier (if kno	own)			
Occupancy start date		DD		YY
Is the contact address of	the location the same a	as the business address?	Yes 🔀	NoX
If no, complete the addre	ess below	Contact details for the location	on	
If in the UK: Postcode	If not in the UK: Country	Contact name		
Address		Telephone number (including	y STD code)	
Line 1		Mobile number		
Line 3		Email address		
Postal Town				
Line 5				
		Fax number		

Location type

Please cross all that apply, or will apply, to your location.

General

Agricultural holding	Χ	Forestry holding	Χ
Domestic holding (less than 0.50 ha)	Χ	Non-livestock occupier	Х
Croft	Χ	Beekeeper	Х
Estate	Χ	Cross Border	Х

Rural business activity

RDP activity	Х	Food processor	Х
Non-land based RDP activity	Χ	Nursery	Х
LEADER activity	Χ	Recreational location	Х
Biomass plant	Χ	Wind turbine site	Х

Livestock related

Livestock keeper – major (more than 10 animals)	X	Pig unit	x
Livestock keeper – minor (less than 10 animals)	Х	Sheep stock club	Х
Sheep keeper	Х	Abattoir	Х
Cattle keeper – beef	Х	Assembly centre	Х
Cattle keeper – dairy	Χ	Livestock market	Х
Farmed deer keeper	Х	Showground	Х
Poultry unit	Χ	Wildlife park / zoo / hunt kennels	Х

If you are registering land for the first time

Unit name	Grid reference	Indicate which unit will be your Main Unit
		X
		X
		X
		X

Check your grid reference number at www.gridreferencefinder.com

Location area details

One hectare equals 2.471 acres

Total area of the location (owned) in hectares	Total area of the location (rented) in hectares	Total area of the location in hectares

If you need to register or maintain land parcels against this location you will also need to complete a land maintenance form (PF06).

Part 7 – About the Feed Business activities

If you carry out (or intend to carry out) any of the activities shown below you are required to be registered with the Food Standards Scotland. Please tick all relevant boxes and you will be registered.

Regulation (EU) 183/2005 requires feed businesses to register with the authorities. We aim to reduce the burden of registration by making use of existing registration processes but Regulation 183/2005 also needs us to collect information about activities. Please choose all the categories that most apply to your business. This information will be passed to Food Standards Scotland.

Type of food production and use

Growing crops for feeding or selling
Industrial activities
Mixing feed with additives and pre-mixtures
Mixing feed with compound feeding stuffs (includes manufactured 'minerals')
Not mixing feed (includes top-dressing 'minerals')
Production – for own use
Storage of feed and feed products (not for your own use)
Transport of feed and feed products (if you operate as a haulier)
Other

If other, please give more details

You may wish to use the space below to provide some more detail on why you are submitting this form. This should be **additional** information to that provided elsewhere in the relevant questions.

X X X X X X

Part 8 – Declaration and undertaking

The data you have provided in this form are subject to the provisions of the Freedom of Information (Scotland) Act 2002 (FOISA), the Data Protection Act 1998 and the Environmental Information (Scotland) Regulations 2004 (EIR). It is Scottish Ministers' policy to share relevant data, including historical, that is held on your business with other organisations for legitimate purposes and when required to do so and to share relevant data under FOISA and EIR when it is in the public interest.

If you are going to appoint an advisory firm or Business Representative to act on behalf of the business, please complete the business mandate form (PF05) and send it to us with this form.

The Responsible Person for the business should complete the declaration below

Signature	
Name (Block capitals)	

Date



If you are the advisory firm acting on behalf of the business you should complete the declaration below.

Please provide your advisory firm ID					
Signature					
Name (Block capitals)					

Date



NOTES:

Please send your completed registering a business form (PF01), with any relevant documentation, to your local RPID area office. You can find a list of all the addresses at https://www.ruralpayments.org

I, as the Responsible Person, agree to the Terms and Conditions on behalf of the business.

I, as the Responsible Person, confirm that I am duly authorised to act on behalf of the business.

If the Responsible Person or business member has a financial interest in another UK rural business that is claiming funding, please continue to list those businesses here.

Business member name	Business member name
Business name	Business name
Relationship to business	Relationship to business
Country and reference number of this business	Country and reference number of this business
Does the business submit a separate Single Application Form (SAF)? Yes No	Does the business submit a separate Single Application Form (SAF)? Yes No
Business member name	Business member name
Business name	Business name
Relationship to business	Relationship to business
Country and reference number of this business	Country and reference number of this business
Does the business submit a separate Single Application Form (SAF)? Yes No	Does the business submit a separate Single Application Form (SAF)? Yes No X
Business member name	Business member name
Business name	Business name
Relationship to business	Relationship to business
Country and reference number of this business	Country and reference number of this business
Does the business submit a separate Single Application Form (SAF)? Yes No	Does the business submit a separate Single Application Form (SAF)? Yes No X

If the Responsible Person or business member has a financial interest in another UK rural business that is claiming funding, please continue to list those businesses here.

Business member name	Business member name
Business name	Business name
Relationship to business	Relationship to business
Country and reference number of this business	Country and reference number of this business
Does the business submit a separate Single Application Form (SAF)? Yes No	Does the business submit a separate Single Application Form (SAF)? Yes No
Business member name	Business member name
Business name	Business name
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Country and reference number of this business	Country and reference number of this business
Does the business submit a separate Single Application Form (SAF)? Yes No	Does the business submit a separate Single Application Form (SAF)? Yes No X
Business member name	Business member name
Business name	Business name
Relationship to business	Relationship to business
Country and reference number of this business	Country and reference number of this business
Does the business submit a separate Single Application Form (SAF)? Yes No	Does the business submit a separate Single Application Form (SAF)? Yes No X