 **LIVE SHELLFISH MOLLUSCS**

**REGISTRATION DOCUMENT REQUEST FORM**

**Requests for Registration Documents should be made at least 7 days prior to requirement**.

A maximum of 10 documents can be issued at each request. New documents will not be issued until harvesters return pink copies.

Please complete and return this form to:

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| **DUMFRIES AND GALLOWAY COUNCIL**  **Environmental Health**  **Militia House**  **English Street**  **DUMFRIES**  **DG1 2HR**  Or e-mail to: [EnvironmentalHealth@dumgal.gov.uk](mailto:EnvironmentalHealth@dumgal.gov.uk)  If you require any help phone: 030 3333 3000 |

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| --- | --- | --- |
| **NAME AND ADDRESS OF GATHERER:** |  | |
| **TELEPHONE NUMBER:** |  | |
| **EMAIL ADDRESS:** |
| **SPECIES GATHERED:** |  | |
| **NUMBER OF DOCUMENTS REQUESTED:** |  | |
| **LOCATION OF AREA:** |  | |
| **CLASSIFICATION OF AREA:** |  | |
| **VESSEL NAME AND PLN:** |  | |
| **RAZOR FISH LICENCE NUMBER (Razors Only):** |  | |
| **DATE OF REQUEST:** |  |  |
| **NAME OF PERSON/COMPANY AND ADDRESS DOCUMENTS IS TO BE ISSUED TO:** |  | |
| **ADDRESS DOCUMENTS TO BE MAILED TO:**  **DOCUMENTS ARE ONLY BEING MAILED OUT AT THE MOMENT DUE TO CURRENT RESTRICTIONS** |  | |
| **FOOD AUTHORITY WHERE MOLLUSCS ARE TO BE LANDED:** |  | |
| **DESTINATION OF SHELLFISH BEING MOVED (INC APPROVAL NUMBER IF APPLICABLE)** |  | |

**PLEASE NOTE: ANY SHELLFISH FROM CLASS B WATERS MUST GO TO AN APPROVED DEPURATION FACILITY**