



# FARM RECORD BOOK

Sustainable Horticulture Assurance Scheme

Revised 2017

Growing the success of Irish food & horticulture

*Bord Bia*  
Irish Food Board

## Bumblebee Records

<b><u>Hive Sourcing</u></b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>
Date received	<i>10/04/2015</i>			
Supplier (Name, Contact details, etc.)	<i>ABC Beekeepers</i>			
Number of bees	<i>Glenvale, Co. Kerry</i>			
Documentation received (supplier declaration, certificates, etc)	<i>Tel 12345678</i>			

<b><u>Hive Placement</u></b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>
Date placed	<i>10/04/2015</i>			
Location (be specific, include map for field placement)	<i>Field A, top left section, near oak tree</i>			
Crop	<i>apples</i>			
Stocking rate	<i>2 hives/ha</i>			
Observations (weather, pests, nearest hives, foraging sources, etc)	<i>Dry, warm weather, no pests noted in vicinity, hedgerows nearby for foraging</i>			

<b><u>Hive Disposal</u></b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>
Date disposed	<i>01/09/2015</i>			
Method of Killing colony and time exposed	<i>Supplier returned to site to remove and kill colony</i>			
Disposal location (Onsite or off-site)	<i>Off-site (supplier managed)</i>			

## Bumblebee Records

<b><u>Bumblebee Monitoring Records</u></b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>
Date placed	<i>10/04/2015</i>			
Individual Monitoring (Initials & Signature)	<i>JB, Joe Bloggs</i>			
Location	<i>Field A, top left section, near oak tree</i>			
Pollination/foraging activity indicators	<i>Bees active, apples on trees &amp; flowers in hedgerow flowering</i>			
Observations (bee health, behaviour, signs of pests, disruptions, box damage, parasites, etc)	<i>Bees in good health, active, no signs of pest or hive damage.</i>			

<b><u>Bumblebee Management Records</u></b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>	<b>Hive [ID]</b>
Date and time action taken	<i>24/04/2015</i>			
Individual s participating (Initials & Signature)	<i>JB, Joe Bloggs</i>			
Location	<i>Field A, top left section, near oak tree</i>			
Type of management taken (hive box moved, opened for inspection, inputs provided, early disposal of hive, pesticide application, pest control, etc)	<i>Hive box opened for inspection</i>			
Details of management taken	<i>None required</i>			
Observations (bee health, behaviour, signs of pests, disruptions, box damage, parasites, etc)	<i>Bees appeared in good health, no signs of pests, disruptions to hive</i>			

## Calibration Record

---

**Note** – New sheet to be used for each piece of equipment requiring calibration

Equipment ID / Name:	<i>Pesticide boom sprayer (Purchased Feb 2011)</i>			
Equipment Location:	<i>N/A</i>			
Date of Calibration	Result	Follow Up Action (If required)	Next Calibration Date	Signature
<i>01/06/2013</i>	<i>Pass</i>	<i>N/A</i>	<i>01/06/2015</i>	<i>JB</i>
<i>01/05/2016</i>	<i>Inspected &amp; Calibrated by DAFM registered inspector 01/05/2015 and certificate filed</i>		<i>01/05/2017</i>	<i>JB</i>

## Cleaning Record

<b>Area/Item</b> (e.g. Chills/ packing line)		<i>Chills 1 &amp; 2</i>			
<b>Responsible Person</b>		<i>Joe Bloggs</i>			
<b>Cleaning chemicals used (name)</b>		<i>Xyloclean Detergent &amp; Supersan Disinfectant</i>			
<b>Frequency &amp; Method of Cleaning</b>		<i>Weekly. Manual cleaning (Gross clean, detergent application, rinse, disinfectant application &amp; air dry).</i>			
<b>Date Cleaned</b>	<b>Initials</b>	<b>Comment*</b>	<b>Date Cleaned</b>	<b>Initials</b>	<b>Comment*</b>
<i>01/01/2016</i>	<i>JD</i>				
<i>08/01/2016</i>	<i>JD</i>				
<i>10/01/2016</i>	<i>BT</i>	<i>2 crates of spoiled strawberry punnets removed from chill 1 and area cleaned</i>			

## Cleaning Schedule

Item/Area	Frequency	Equipment and Chemicals	Method	Responsible Person
Floors	End of each day or as required	Broom, mop, sprayer and detergent	<ol style="list-style-type: none"> <li>Sweep area</li> <li>Apply detergent and mop area</li> <li>Rinse thoroughly with water</li> <li>Remove water with mop</li> </ol>	Joe Bloggs (Quality Manager)
Walls, windows & ceilings	Monthly or as required	Cloths, brush and detergent	<ol style="list-style-type: none"> <li>Remove any dry debris</li> <li>Rinse with water</li> <li>Apply detergent and wash</li> <li>Rinse with water</li> <li>Air dry</li> </ol>	Joe Bloggs (Quality Manager)
Packing lines & work tables	After use	Wiping cloths, detergent and disinfectant	<ol style="list-style-type: none"> <li>Remove food debris and soil</li> <li>Rinse with water</li> <li>Apply detergent and wash</li> <li>Rinse with water</li> <li>Apply disinfectant</li> <li>Air dry</li> </ol>	Joe Bloggs (Quality Manager)
Chills and storage areas	Weekly or as required	Cloths, brush, mop, detergent & disinfectant	<ol style="list-style-type: none"> <li>Remove food debris</li> <li>Rinse with water</li> <li>Apply detergent and wash</li> <li>Rinse</li> <li>Apply disinfectant</li> <li>Air dry</li> </ol>	Joe Bloggs (Quality Manager)
Door knob, drawers & switches	Daily	Damp cloth and detergents	<ol style="list-style-type: none"> <li>Remove debris</li> <li>Apply detergent</li> <li>Rinse with damp cloths</li> <li>Dry with paper towels/air dry</li> </ol>	Joe Bloggs (Quality Manager)
Utensils & containers, etc.	After each use	Wiping cloths, brushes, detergent and disinfectant	<ol style="list-style-type: none"> <li>Remove food debris</li> <li>Rinse</li> <li>Apply detergent &amp; wash</li> <li>Apply disinfectant</li> <li>Ary dry</li> </ol>	Joe Bloggs (Quality Manager)

## Cold Room Temperature Record

### Note: Monthly Record

Unit	Cold room ____		Cold room ____		Cold room ____		Cold room ____		Cold room ____		Cold room ____		Comments / Actions	Operator Signature
Date	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM		
01/02/2016	3°C	7°C/ 4°C	4°C	4°C									Thermostat adjusted in Cold room 1, rechecked 1 hour later	Joe Bloggs
02/02/2016	4°C	3°C	3°C	3°C									No issues noted.	Joe Bloggs

Manager/Supervisor check on	07/02/2016		
Signature	<i>Adam James</i>		

## Complaints Record

Customer Name:				Customer
Customer Address:				
Customer Mobile:		Date of Complaint:		
Customer Email:		Complaint Ref. Number (If Applicable)		
Product Name:		Traceability Ref.		Product
Batch Number:		Quantity Affected:		
Bord Bia / GlobalG.A.P Product (Please Circle)	Yes / No	Bord Bia Contacted (If "Product Recall" is Yes)	Yes / No	Bord Bia
Criticality (Please Circle)	High / Medium / Low	Bord Bia Person Contacted:		
Product Recall Required (Please Circle)	Yes / No	Date / Time of Contact with BB:		
Description of Complaint:				Complaint
Recorded By:		Date:		
Investigation detail:				Initial Action
Completed By:		Date:		
Remedial Action taken:				Remedial Action
Completed By:		Date:		
Corrective Action taken: (to prevent re-occurrence)				Corrective Action
Completed By:		Date:		
Complaint Resolved: (Please Circle)	Yes / No			Sign Off
Authorised By:		Date:		



## Crop / Field Record

Field name/Number/ID	Field 1		Area (ha)	5 ha		Crop year	1										
Soil Type	Acid Brown Earth (on Sandstone)		Current Crop	Onions		Previous Crop	potatoes										
Seed Variety	Onions (Aurora)		GMO Free (Y/N)	Y		Seed Supplier	[Seed Supplier Name]										
Resistant to	Fusarium Crown Rot, Pink Root Rot, Bolting		Seed Treatment (Y/N) (Details of treatment if Y)	Y, Heat treated.		Purchased Batch No	1501014A										
Sowing date	10/04/2015		Comments Ground prep details, land condition at planting	Ground in good condition (good pH and moisture levels), farm manure spread 25/03/2014 due to low P & K values.													
Date of last soil analysis (Retain copies for inspection)	15/11/2014																
Previous crop residues	N:	40ppm	P:	20ppm	K:	45ppm	Mg:	NA	Mn:	NA	Cu:	NA	Zn:	NA	Ph:	6.5	
	Other (specify):		NA														
Comments	None																
Date of last Water Analysis	15/11/2014		Action Taken (if required)	None		Irrigation used (Y/N)	Y		Source of Irrigation	Well							
Harvest Date	05/09/2014		Quantity Harvested (t)	20t		Quantity Rejected (t)	1.5t										

Date	Crop/Field observation(s)
05/05/2014	Crop weeded
21/05/2015	Crop weeded

Equipment Calibration Schedule

Equipment ID/Name*	Equipment Location*	Current Use / Purpose*	Operating Range	Measurement Accuracy	Operational Checks* (if applicable)	Calibration Frequency*	Responsibility*
<i>Batch Weigher (BW01)</i>	<i>Packing Store</i>		<i>5kgs to 500kgs</i>	<i>+/- 500g</i>	<i>Dummy weight to be used every month</i>	<i>Annual</i>	<i>JB</i>
<i>Boom Sprayer (BS01)</i>	<i>Grain Store</i>		-	-	<i>Visual checks before use</i>	<i>Annual</i>	<i>JB</i>

\* Mandatory element of record



## Fertiliser Application Record

**Note** This record is designed for all fertilisers including farm manures, composts, etc.

Date*	Location*	Crop*	Name/Type of Fertiliser*	Content / Characteristics	Rate of Application (Kg/ha, m <sup>3</sup> /ha or frequency)	Area applied to (Ha)	Total amount applied*	Equipment Used	Method of Application*	Pre-planting interval	Initials*
25/03/2015	Field 1	Onions	Organic fertiliser	Farm manure	33m <sup>3</sup> /ha	5Ha	2 tonnes	Spreader	Broadcast	01/04/2014	JB

Comments / Observations:

*Weather dry and calm on day of spreading on 25/03/2015.*

\* Mandatory element of record

## Fertiliser Inventory Record

Date	Fertiliser Name & Type (liquid/granular)	Quantity in (Kg or L)	Quantity out (Kg or L)	Total in stock (Kg or L)	Operator Signature
01/02/2016	Fertiliser X, granular	10 Kg	None	10 Kg	Joe Bloggs
03/02/2016	Fertiliser Y, liquid	20 L	None	5 L	Joe Bloggs

## Glass and Hard Plastics Record

Item Name	Item Description & Location	Quantity	Item(s) Protected Against Breakage?
<i>Lights Covers</i>	<i>Light covers in pack house</i>	6	No
<i>Lights Covers</i>	<i>Light covers in store rooms</i>	8	No
<i>Lights Covers</i>	<i>Light covers in chill</i>	3	No
<i>Infeed Conveyor</i>	<i>Infeed belts on packing lines</i>	2	No
<i>Soap dispenser</i>	<i>Soap Dispenser in pack house</i>	1	No
<i>Paper towel holder</i>	<i>Paper Towel holder in pack house</i>	1	No
<i>Plastic containers (Various)</i>	<i>Plastic containers for transport of produce</i>	10	No
<i>Lights Covers</i>	<i>Light covers in pack house</i>	6	No
<i>Lights Covers</i>	<i>Light covers in store rooms</i>	8	No
<i>Lights Covers</i>	<i>Light covers in chill</i>	3	No

## Irrigation Record

Field Number/ID	1	Crop			Onions	Irrigation Type	Drip irrigation	Efficiency Level	90%
Date & Time	Conditions of field/Moisture levels	Irrigation water source	Rate of application per hour (mm)	Length of irrigation (hours)	Irrigation water application (mm)	Total application (incl efficiency)	Comments		
05/07/20158 8 am-12pm	dry	Mains water	1mm/hr	4	4	3.6	Very dry fortnight (no rain for 6 days) prior to irrigation		

## Laboratory Analysis Request Form

<b>Name:</b>	<i>Your Name</i>	<b>Laboratory Name:</b>	
<b>Contact Number:</b>	<i>Your mobile no.</i>	<b>Lab ISO 17025 Accreditation:</b>	Yes      No
<b>Send Report to:</b>	<i>Me@Myfarmemail.ie</i>		
<b>Sample type:</b>	<i>Water      Soil      Produce</i>		

Date Sample Taken	Sample Location & Details	Taken by:	Sample Id	Parameters for analysis	Units required	Limits *	Reported Result	In Spec Y/N
23/05/2016	Growing house 1, water from overhead line	A. Farmer	Well Water GH1	<i>Enterococci</i>	<i>Number/100ml</i>	<i>0</i>		
				<i>Escherichia coli</i>	<i>Number/100ml</i>	<i>0</i>		
				<i>Ammonia</i>	<i>NH4 mg/l</i>	<i>0.3 (0.23 as N)</i>		
				<i>Nitrites</i>	<i>NO2 mg/l</i>	<i>0.1 (0.03 as N)</i>		
				<i>Nitrates</i>	<i>NO3 mg/l</i>	<i>50 (11.3 as N)</i>		

\*Please ensure to review the limits frequently as these are subject to change

## Machinery & Equipment Maintenance Record

Machine/Equipment	Make/Model	Date Inspected/Service	Action Notes	Operator Signature
<i>Infeed conveyor</i>	<i>[Make]</i>	<i>22/03/2016</i>	<i>Guard replaced</i>	<i>Joe Bloggs</i>
<i>Washer</i>	<i>[Make]</i>	<i>29/03/2016</i>	<i>Opened all covers, replaced bolt and ran for 30 mins</i>	<i>Joe Bloggs</i>



## Pesticide Application Record

**Note:** To be completed for any pesticide used on farm (including PPPs, biocides, etc)

Date of Application*	Crop*	Location* (LPI No.)	Product Name*	PCS No.*	Justification for Use*	Application Area / Tonnage* (Ha)	Application Rate* (L or Kg/ha/m <sup>2</sup> )	Water volume* (L/ha)	Harvest Interval (Days)	Buffer Width if applicable (m)*	Nozzle type (If using STRIPE)	Method of Application*	Weather Conditions	Date of 1st possible harvest/Use	Initials & PU No*
15/07/2015	Carrots	E123456	Herbicide Name	02316	Weeds	4 Ha	2 L/ha	350				Boom Sprayer	Dry, little to no wind	01/09/2015 (harvest)	JB, PU00001
16/07/2015	NA	Store 12	Biocide Name	12345	Routine cleaning of floors	NA	1 L/m <sup>2</sup>	100				Knapsack	Easterly, low speed	NA	JC, PU00022

Comments / Observations:

\* Mandatory element of record as part of the DAFM IPM Record Sheet

## Pesticide Inventory Record

Date	Pesticide Name & PCS	Quantity in (Kg or L)	Quantity out (Kg or L)	Total in stock (Kg or L)	Operator Signature
<i>01/02/2016</i>	<i>Cliophar 100, 04899</i>	<i>10 L</i>	<i>None</i>	<i>10 L</i>	<i>Joe Bloggs</i>
<i>03/02/2016</i>	<i>Diablo, 03939</i>	<i>20 kg</i>	<i>None</i>	<i>5 kg</i>	<i>Joe Bloggs</i>

## Post Harvest Treatment Application Record

**Note:** To be completed for any post harvest treatment applied to crop/produce

Date of Application	Crop treated (including batch number or identifier)	Product Trade Name	PCS No.	Justification for Use	Usage Rate (kg or l/area/volume/weight)	Extent of use* (Area/Volume/Weight)	Quantity Used (kg/l)	Interval between treatment & consumption	Operator Initials
15/07/2015	Cox Apples Batch no: 150717A	Product Name	2323	Calcium levels	13.5l/1000l	3 tonnes	20l	5 days	JB

Comments / Observations:

---



---



---



---

\* Extent of use includes the area of land treated, or the volume of water treated, or the volume/weight of stored crop/produce treated)

## Product Dispatch Record

Week Commencing		07/03/2016		Quantity (Kg)	Visual Inspection			Operator Initials
Date	Product Supplied	Customer Name	Meets quality criteria		Correct Label in place (if applicable)	Correct logo in place (if applicable)		
07/03/2016	Bagged potatoes	[Customer Name]	1000Kg	Y	Y	Y	Joe Bloggs	
08/03/2016	Packed leeks	[Customer Name]	500Kg	Y	N*	Y	Joe Bloggs	
09/03/2016	Packed leeks (re-work)	[Customer Name]	100kg	Y	Y	Y	Joe Bloggs	
Comments / Action Taken								
*07/03/2016 – Incorrect Batch number on 1 pallet of packed leeks for [Customer Name], produce returned for re-labeling before dispatch. Re-checked 2 hours later, correct batch number in place, released for dispatch.								

Manager/Supervisor Signature	<i>Adam James</i>	Signoff Date	12/03/2016
------------------------------	-------------------	--------------	------------

## Product Withdrawal / Recall Record

<b>Details of Withdrawal/Recall:</b>		<i>Test Withdrawal of strawberries (Batch Code 16010315)</i>			
<b>Start Date &amp; Time:</b>		<i>03/01/2016 10.30am</i>	<b>Completion Date &amp; Time:</b>		<i>02/01/2016 10:30 - 2 hrs 30 mins</i>
<b>Responsible Person's Signature &amp; Position:</b>		<i>Joe Bloggs Managing Director</i>			
Date & Time	Name of Contacted Person & Organisation	Communication details	Action(s) taken	Action taken Effective?	Sign Off
<i>03/01/2016 08.00am</i>	<i>Joe Bloggs (Quality Manager) Distributor X</i>	<i>Phone call to Quality Manager to initiate test withdrawal of strawberries Batch Code 16010315. Pallet reference (152), number of punnets (60) for withdrawal quoted.</i>	<i>Distributor instructed to identify pallet &amp; strawberries, isolate and label as "test withdrawal."</i>	<i>yes</i>	<i>MC</i>
<i>03/01/2016 08.10am</i>	<i>Joe Bloggs (Quality Manager) Supplier Y</i>	<i>Notification of test withdrawal of strawberries Batch Code 16010315 from Distributor X</i>	<i>None</i>	<i>N/a - Mock recall</i>	<i>BL</i>
<i>03/01/2016 09.30am</i>	<i>Quality Manager [Company Name]</i>	<i>Phone call from Distributor X to inform Quality Manager that Strawberries Batch Code 16010315 had been identified, isolated and labelled as "test withdrawal" and that no product had been dispatched to customers</i>	<i>Managing Director informed of actions of Distributor X and confirmation that strawberries were isolated and none dispatched to customers Decision that test Recall not required.</i>	<i>Yes</i>	<i>MC</i>
<i>03/01/2016 10.00am</i>	<i>Joe Bloggs Distributor X (Quality Manager)</i>	<i>Phone call to Distributor X to confirm completion of test withdrawal &amp; release of Strawberries Batch Code 16010615 from withdrawal</i>	<i>None</i>	<i>N/A</i>	<i>BL</i>
<i>03/01/2016</i>	<i>Joe Bloggs (Quality Manager) Supplier Y</i>	<i>Notification of successful completion of test withdrawal of strawberries Batch Code 16010315</i>	<i>Managing Director informed of completion of test withdrawal and withdrawal/recall record verified, signed and dated by MD.</i>	<i>Effectively identified location of all products</i>	<i>BL</i>

## Raw Materials Receipt Record

Week Commencing		25/01/2016		Supplier Batch Code	Quantity Received	Meets Acceptance Criteria* (Y/N)	Inspected by	Comments	For organic manure only	
Date of Delivery	Supplier Name	Bord Bia Approved (Produce Only)	Description of Raw Materials						Age of Materials (months)	Treatment & Storage conditions
26/01/2016	ABC Seed Suppliers, Cork	NA	Onion (bulb) seeds, Bedfordshire Champion Variety	1601B102	10kg	Y	JC		N/A	
27/01/2016	XYZ Farm Ltd, Limerick.	Yes	Farm manure	160127B1	5 tonnes	Y	JC		14 months	Composted Covered outdoor storage

Manager/Supervisor Signature	<i>Adam James</i>	Signoff Date	07/02/2016
------------------------------	-------------------	--------------	------------

\* Each product should have acceptance criteria specific to that product. E.g. Correctly labelled, within specific temperature range, quality, etc.

## Staff Training Record

Name		Joe Bloggs		Start Date		
Role/Job Title		Pack house Supervisor		Translator needed		Yes / No
Experience/Qualifications		7 years' experience in growing sector.				
Date of Training	Training Subject Area	Training Provider Name	Trainee signature	Trainer Signature	Translator Signature	Review Date (If applicable)
01/06/2014	Induction Training	[Name]	Joe Bloggs	Name	Yurghita Novakowski	None
02/06/2014	Pack house & packing lines Training	[Name]	Joe Bloggs	Name	Name	None
05/06/2014	Health & Safety Training	[Name]	Joe Bloggs	Name	Name	None
06/06/2014	Pack house Hygiene Training	[Name]	Joe Bloggs	Name	Name	None
30/06/2014	First Aid Certification Training	[Training Services Company X]	Joe Bloggs	Name	Name	29/06/2016
02/03/2015	Waste Reduction Principles	[Name]	Joe Bloggs	Name	Name	None

## Tool and PPE Issue Record

Week Commencing	14/03/2016											
Day	Number of Items issued at Start of Production					Number of items returned at End of Production					Comments/Action Taken	Operator Initials
	Knives	Secateurs	Other	Other	Other	Knives	Secateurs	Other	Other	Other		
Monday	5	5	5	NA	NA	5	4 (+1 during harvest)	5	NA	NA	Pair of secateurs broken during harvest. Removed from circulation during harvest.	JB
Tuesday	8	10	10	NA	NA	8	10	9	NA	NA	All items returned were, intact.	JB
Wednesday												
Thursday												
Friday												
Saturday												
Sunday												

Comments/Corrective Action (Record all issues with tools/PPE):

1 Pair of secateurs broken during harvest on Monday. Removed from circulation and disposed of. New secateurs provided during shift.

Manager/Supervisor Signature	<i>Adam James</i>	Date	07/02/2016
------------------------------	-------------------	------	------------



## Vehicle Cleaning & Inspection Record

**Note:** All vehicles used for the delivery of produce must be suitable for transport and be maintained in a hygienic condition, free from debris, damage, taints / smells or possible foreign body contaminants.  
**Cleaning must be undertaken on a regular basis based on risk assessment.**

Vehicle Registration		141-KY-0001				
Date	Free from damage & debris? (Y/N)	Free from taints & smells? (Y/N)	Cleaned Internally? (Y/N)	Cleaned Externally? (Y/N)	Comments / Corrective Action taken	Operator Initials
03/01/2016	Y	N	Y	N	Cleaned internally following failed inspection. Manual clean using detergent and disinfectant.	JB
05/01/2016	Y	N	N	Y	Power-washed externally using detergent	JB

Comments / Action Taken
05/01/2016 Vehicle not clean (produce spill in van, leaving debris and staining), vehicle cleaned and returned for inspection and was deemed suitable for transport.


# Vermin Control Record

**Note:** In addition to this record a map showing the location of bait points is required.

Date of Inspection	Bait type (e.g. loose grain, wax block, pellet, powder, liquid)	Bait Number (As per map)																				Action taken	Inspection Completed By (Signature)		
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20				
02/01/2017	Storm Secure Wax block	/	/	/	/	/	/	X	/	/	/	/	X	/	/	/	/	/	O	/	/				
06/02/2017	Storm Secure Wax block	/	/	/	/	/	/	X	/	/	/	/	/	X	/	/	/	/	O	/	/				
06/03/2017	Storm Secure Wax block	/	/	/	/	/	/	X	/	/	/	/	X	/	/	/	/	/	O	/	/				
03/04/2017	Force mouse pellets	/	/	/	/	/	/	/	X	/	/	/	/	X	/	/	/	/	O	/	/				

Bait Intact	/	Bait Taken	X	Bait Missing	O
-------------	---	------------	---	--------------	---

## Visitor Record

Date	Name (PRINT)	Company	Time Arrival	Time Depart	Vehicle Registration (If Required)	Visiting?	Aware of Hygiene/Biosecurity/Health & Safety Requirements	Visitor Signature
17/03/2016	JOE BLOGGS	ABC FARMING LTD.	09:00	11:00	10-D-19437	<i>Jane Doe</i>		<i>Joe Bloggs</i>

## Waste Water - Land Application Record

**Note:** This record is designed for recording the land spreading of soiled water. (Note: line one is filled as example)

Date	Content / Characteristics	Rate of Application (lts/ha)	Location	Ground Conditions	Area applied to (Ha)	Total volume applied	Method of Application	Weather	Carried out by
01/09/16	Water from potato washer	4500	Field 1	Dry/firm	2	9000lts	Downward splash plate	Calm, dry	John Doe

**Notes:**

- The volume spread out must be compliant with the EU GAP Protection of Water Act 2014:
- In any period of 42 days a total quantity of 50,000 litres per hectare or by irrigation at a rate exceeding 5 mm per hour.
- In an area which is identified on maps compiled by the Geological Survey of Ireland as “Extreme Vulnerability Areas on Karst Limestone Aquifers”, soiled water shall not be applied to land, in quantities which exceed in any period of 42 days a total quantity of 25,000 litres per hectare by irrigation at a rate exceeding 3 mm per hour unless the land has a consistent minimum thickness of 1m of soil and subsoil combined.