

NAME OF APPLICANT

UK Sheepmeat and Goatmeat

SECTION SEVENTEEN

FORM FOUR

APPLICATION FOR UK SHEEPMEAT AND GOATMEAT GENERAL QUOTA ALLOWANCE

- This application is made in terms of the Quota Allowance Allocation System in respect of **United Kingdom Sheepmeat and Goatmeat Tariff Rate Quota** ("Allocation System").
- Sections 4 and 13 of the Allocation System are of particular relevance when completing this application.
- This application relates to the Quota Year from 1 January to 31 December.
- The application must be lodged with the Board on or before 15 October prior to the commencement of the Quota Year to which this application relates.
- The application must be sent to the **Quota Officer at the New Zealand Meat Board.**

| APPLICANT DETAILS | |
|--|---|
| ER number | Telephone |
| Email: | Facsimile: |
| Postal address: | |
| Street address: | |
| Note: Notices by the Board will be sent to the a | pplicant at its postal address, facsimile number or email address given above |
| CONTACT PERSONS | |
| Specify two people who are authorise | d to act as agents of the applicant (e.g. Chief Executive, Marketing |
| Manager). | |
| Name: | |
| Position | |
| | |
| Name | |
| Position | |
| | |



UK Sheepmeat and Goatmeat

SECTION SEVENTEEN

FORM FOUR

DECLARATION

I am authorised to make this application on behalf of the applicant company and I can verify that:

- (a) the applicant agrees to be bound by the terms of the Allocation system which the applicant has received, and which I have read prior to making this application.
- (b) All the statements contained in this application and any attached documentation are to the best of my knowledge true and correct.
- (c) the applicant acknowledges that it will immediately advise the Board in writing of any change of any of the details contained this application.

| Signature: | |
|-----------------------|--|
| Nama: (p) | |
| IName. (Please print) | |
| Position: | |
| Date: | |

(d) The required application fee is enclosed.