



BUTCHER ONBOARDING FORM

Fields marked with * are required for full FSA compliance. Please complete as much as you can — if any details aren't to hand right now, that's absolutely fine.

We'll be happy to help with anything outstanding and, where possible, we can verify details directly via the FSA register or your local authority.

We're committed to making this process as straightforward as possible while keeping everyone safe and compliant.

BUSINESS INFORMATION

Business Name *	_____
Company Registration Number	_____
VAT Number	_____
Business Entity Type *	<input type="checkbox"/> Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Company <input type="checkbox"/> Other: _____
Butcher Type *	<input type="checkbox"/> Retail Only <input type="checkbox"/> Wholesale Only <input type="checkbox"/> Retail & Wholesale <input type="checkbox"/> Cutting Plant
Contact Name	_____
Phone	UK format _____
Email	_____
Accounts Contact Name	_____
Accounts Phone	_____
Accounts Email	_____
Site Address <i>Full postal address incl. postcode</i>	_____ _____ _____

FSA COMPLIANCE

FBO Number <i>Food Business Operator registration</i>	_____
Cutting Plant Approval <i>* Required if Butcher Type is Cutting Plant</i>	UK CP XXXX _____
HACCP Certified <i>Hazard Analysis & Critical Control Points</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Food Hygiene Rating <i>FSA Food Hygiene Rating</i>	<input type="checkbox"/> 5 - Very Good <input type="checkbox"/> 2 - Improvement Necessary <input type="checkbox"/> 4 - Good <input type="checkbox"/> 1 - Major Improvement Necessary <input type="checkbox"/> 3 - Generally Satisfactory <input type="checkbox"/> 0 - Urgent Improvement Necessary
Allergen Management Confirmed Allergen procedures in place per Food Information Regs 2014	<input type="checkbox"/> Yes <input type="checkbox"/> No

PROCESSING CAPABILITIES

Species Handled * <i>Tick all that apply</i>	<input type="checkbox"/> LAMB <input type="checkbox"/> BEEF <input type="checkbox"/> PORK
Processing Capabilities * <i>Tick all that apply</i>	<input type="checkbox"/> Whole Carcass <input type="checkbox"/> Sausages <input type="checkbox"/> Primal Cuts <input type="checkbox"/> Burgers <input type="checkbox"/> Retail Cuts <input type="checkbox"/> Cured Meats <input type="checkbox"/> Minced Meat
Cold Storage Type	<input type="checkbox"/> Chill Only <input type="checkbox"/> Chill & Frozen <input type="checkbox"/> Frozen Only

BANK DETAILS (FOR BACS PAYMENT)

Bank Name	_____
Account Name	_____
Bank Sort Code <i>6 digits</i>	XX-XX-XX _____
Bank Account Number <i>8 digits</i>	8 digits _____

ADDITIONAL NOTES

Additional Notes	_____ _____ _____ _____
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DUE DILIGENCE DECLARATIONS

Emergency / Recall Contact 24/7 name + phone	_____
Public Liability Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No
No Current Enforcement Actions No prohibition orders, improvement notices or pending prosecution	<input checked="" type="checkbox"/> Confirmed
GDPR / Privacy Notice I acknowledge the Farmhub-EX privacy policy	<input checked="" type="checkbox"/> Acknowledged

DECLARATION & SIGNATURE

I confirm that the information provided in this form is accurate to the best of my knowledge. I understand that where any details are outstanding, Farmhub-EX may follow up or verify these directly via the FSA register or the relevant local authority, as set out at the beginning of this form, to ensure full compliance with UK food safety regulations.

Authorised Signature:

Position:

Print Name:

Date:

Data Protection: We take your privacy seriously. Your information will be held securely by Farmhub-EX Limited and used only for supply chain traceability, order processing, and regulatory compliance in line with UK Food Standards Agency requirements. We will never share your data with third parties except where required by law.

Please return this form — complete or in progress — to info@farm-ex.com or your Farmhub-EX account manager. We'll take it from there and help with anything outstanding.