



FOREST SERVICE
Department of Agriculture and Food

FOREST ENVIRONMENT PROTECTION SCHEME (AFFORESTATION)

FORM 1: APPLICATION FOR APPROVAL

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Contract No.															
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APPLICANT DETAILS

Please complete in **BLOCK CAPITALS**

1. Surname																
2. First Name(s)																
	Mr <input type="checkbox"/> Ms <input type="checkbox"/>															
3. Company Name (if applicable)																
4. Address (postal)																
											5. E-mail address					
											6. Fax No.					
7. Date of Birth (required for verification purposes, only)	D		D		M		M		Y		Y		Y		Y	
											8. Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>			
											9. Nationality					
10. Tel. Numbers	Home:					Business:					Mobile:					
11. PPS / RSI Number of each applicant											12. PPS/RSI No. of landowner/s if different					
13. Farm / Herd No.											14. Herd No. of landowner/s if different					
15. VAT No. (if any)											16. C.R.O. No.					
17. Tax District																
18. Occupation	<input type="checkbox"/> Farmer full time <input type="checkbox"/> Part-time Farmer <input type="checkbox"/> Non Farmer <input type="checkbox"/> Public Authority <input type="checkbox"/> Corporate Body															
19. Ownership of Farm	<input type="checkbox"/> Full Owner <input type="checkbox"/> Joint owner <input type="checkbox"/> Lessee															
20. Farm Size = Total Hectares																

A notice will be placed in the relevant provincial newspaper detailing the Townland, DED and area of proposed plantation.

**SITE LOCATION**

21. County			
22. Townland/s PLEASE USE BLOCK CAPITALS			
23. District Electoral Division		24. Folio No.	
25. Distance from home address	Kilometres	26. Nearest Village	
27. Site Area	hectares		
28. O.S. 6" Map No.			

OWNERSHIP AND USE OF PROPOSED SITE

29. Ownership	Are you the owner of the lands Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If 'No' please tick the appropriate boxes</i> Part-owner <input type="checkbox"/> Commonage <input type="checkbox"/> Joint Management Consent <input type="checkbox"/> Partnership <input type="checkbox"/> Leased <input type="checkbox"/> <i>If 'partnership', please specify with whom:</i>		
30. Constraints of ownership	Turbary <input type="checkbox"/> Right of way <input type="checkbox"/> Grazing <input type="checkbox"/> None <input type="checkbox"/>		
31. Present use (hectares)	Agricultural <input type="checkbox"/> Non-Agricultural <input type="checkbox"/> <i>Lands must be in Agricultural Use to qualify for the Afforestation Grant and Element 2: Native Woodland Establishment of the Native Woodland Scheme</i>		
32. Land Status (in hectares)	Unenclosed <input type="checkbox"/> Enclosed <input type="checkbox"/>		
33. Access road to site	Do you have adequate access to manage the site? Yes <input type="checkbox"/> No <input type="checkbox"/> Permission to use <input type="checkbox"/>		
34. Are you currently in REPS?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
35. Do you intend applying for REPS?	Yes <input type="checkbox"/> No <input type="checkbox"/>		

DECLARATION, CONSENT AND APPLICATION

I am over 18 years old.			
I understand that an applicant cannot claim forestry grant or premium in respect of any area which is included in his / her claim under any other area-linked EU scheme in the same calendar year, except where the applicant has fulfilled national rules for these schemes.			
I hereby apply for approval of this proposal. I understand that I must not undertake any forestry work, preliminary or otherwise, before I receive written approval of the Forest Service. Otherwise I have no entitlement to the grant.			
The details given on this form are correct to the best of my knowledge.			
I consent to the release of non-personal information supplied by me in respect of this application as required to comply with current environmental consultation procedures and Freedom of Information Acts.			
I enclose / will provide relevant documentation in relation to ownership of the lands in question. I understand that this documentation must be provided before any grant will be paid.			
I request information on forestry training courses approved by the Department of Agriculture and Food.			
I am responsible for the successful establishment of this forest. The Department will not be held liable for any issues that may arise regardless of any Department inspection that this site may receive.			
I consent to the release of my details to COFORD, the National Council for Forestry Research and Development and Teagasc who may communicate with me in relation to the development of Forestry.			
Applicant/s Signature/s	_____	Date	____/____/____

Where the application is made on behalf of more than one person, all parties must sign.

Where the application is made on behalf of a company or legal entity, please enter the official status of the signatory, e.g. Company Secretary.

**SILVICULTURAL CONSIDERATIONS**

		YES	NO	R*
1.	Is the site suitable for either (i) 15% Broadleaves or (ii) 10% Broadleaves and 5% Scots Pine/Native Evergreens?			
2.	If so does the proposed Broadleaf/Scots Pine/Native Evergreens area meet the minimum width criteria?			
3.	Will at least 20% of the total Conifer area be a species other than Sitka Spruce/Lodgepole Pine?			
4.	How many applications of fertiliser is the site likely to require over its rotation?			

ENVIRONMENTAL CONSIDERATIONS

		YES	NO	R*
1.	<u>Water Quality</u>			
1.1	Is the area designated potentially acid sensitive by the Forest Service?			
1.2	Is the area > 5 ha and sensitive for fisheries?			
1.3	Is the area non-sensitive for fisheries and > 40 ha?			
1.4	Is the area > 10 ha and within a catchment area of a Local Authority designated water scheme?			
2.	<u>Designated Habitats</u>			
2.1	Is the area within NHA, SAC, SPA or National Park?			
2.2	Is the area within 3 km upstream of a pNHA, SAC, SPA or National Park?			
3.	<u>Archaeology</u>			
3.1	Does the area contain an archaeological site or feature with intensive public usage?			
3.2	Does the area contain or adjoin a listed archaeological site or monument?			
4.	<u>Landscape</u>			
4.1	Is the area within a prime scenic area in the County Development Plan or within an area listed in the Inventory of Outstanding Landscapes?			
4.2	Are there any other High Amenity Landscape considerations?			
5.	<u>Size for Notification to Local Authority</u>			
5.1	Is the area greater than 25 ha?			
6.	<u>Other Environmental Considerations</u>			
6.1	Specify			

*Separate report attached

Note: If present, all items listed may require the Forest Service to consult with prescribed bodies, while those in **bold type** may require the Forest Service to undertake public consultation.

Calcium Carbonate CaCO ₃ Test Results as per question 1.1		Required	Submitted	Result Pending
	OS Map No.	Date	Result mg CaCO ₃ per litre	
	February			
	March			
	April			
	May			
Drainage survey Results		Required <input type="checkbox"/>	Submitted <input type="checkbox"/>	
Soil Analysis		Required <input type="checkbox"/>	Submitted <input type="checkbox"/>	



OPERATIONAL PROPOSAL DETAILS

Ground Preparation	Woody Weed Removal <input type="checkbox"/>	Mole Drainage <input type="checkbox"/>
	Ripping <input type="checkbox"/>	Mounding <input type="checkbox"/>
	None (Pit Plant) <input type="checkbox"/>	Ploughing <input type="checkbox"/>
	Other Details:	
Standard Stocking & Spacing	Yes <input type="checkbox"/> No <input type="checkbox"/>	If No please give details:
Planting Method	Angle Notch <input type="checkbox"/>	Pit <input type="checkbox"/>
	Machine <input type="checkbox"/>	Slit <input type="checkbox"/>
	Other Details:	
Fertiliser (type/rate) <small>*GRP = granulated rock phosphate</small>	Zero <input type="checkbox"/>	250Kg grp* <input type="checkbox"/>
	Split Application <input type="checkbox"/>	350Kg grp* <input type="checkbox"/>
	Other Details:	
Drainage	Required <input type="checkbox"/>	Not Required <input type="checkbox"/>
Fencing <small>(to Forest Service Spec.)</small>	Stock <input type="checkbox"/>	Deer <input type="checkbox"/>
	Stock/Rabbit <input type="checkbox"/>	Existing <input type="checkbox"/>
	Stock / Sheep <input type="checkbox"/>	
Firebreaks/Reservoir	Required <input type="checkbox"/>	Not Required <input type="checkbox"/>
Road Access	Provided <input type="checkbox"/>	Required <input type="checkbox"/>
Weed Control	Year 0	
	Year 1	
	Year 2	
	Year 3	

Select any six from the nineteen FEPS Options (insert relevant number)

If Option 19 is selected please describe below:
