

# APPLICATION TO REGISTER A STOCKED FISHERY (FIS) IN ACCORDANCE WITH THE AQUATIC ANIMAL HEALTH (SCOTLAND) REGULATIONS 2009

Please read the accompanying guidance notes before completing this form.

The Aquatic Animal Health (Scotland) Regulations 2009 ('the 2009 Regulations') require all ponds or other installations where the population is maintained only for recreational fishing by rest ocking with aquaculture animals to be registered with Scottish Ministers.

(Read our privacy notice to find out what we do with your information.)

### 1. Applicant (person responsible for the fishery / fisheries)

Organisation / business name													
Nature of organisation /	Angling club				Syndicate						Water owner		
business	Water operator			Other (specify)									
Applicant position													
Title	Mr		Mrs		Miss		Ms		Dr		Other		
Name(s) (in full)			4	1			<u>u</u> u		0	<u>  </u>		1	
Address													
						F	Postco	bde	)				
Telephone no						ł	Fax no	)					
Other telephone no						I	Mobile	n	C				
e-mail									•				
Website													
Number of fisheries you are	respo	ons	ible fo	r, ow	n or c	per	rate						

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	The Marine Directorate, Marine Laboratory, 375 V 9DB. Tel +44 (0)131 2442500, Fax +44 (0)131 244 ms.fishhealth@gov.scot https://www.gov.scot/pol	40944, Email

#### 2. Fishery / water owner details

Fishery name											
Address											
				P	ostco	de					
Owner title	Mr	Mrs	Miss		Ms		Dr		Other		
Name(s) (in full)		 	y								
Address											
				Ро	stcod	e					
Telephone no				Fa	x no						
Other telephone no				Мо	bile n	10					
e-mail											
Website											
Location grid reference											
Water intake grid reference (if applicable)											
Water discharge grid reference (if applicable)											
Map of fishery enclosed							Ye	s		No	

### 3. Water details

Government Region (pre 1997)							
Unitary Council Authority							
(DSFB) covering the fishery (if							
Please detail the n ame of t fishery (if applicable)	he Fishery Trust covering the						
Is the fishery covered by a cor	nservation designation?	Yes	1	No		Unsure	
If yes please specify type (e.g. SSSI, SAC)					,		
Are there any fish holding faci	lities at the fishery?	Yes				No	
If yes, please specify type of fa	acility, number of facilities and sp	ecies I	neld I	belov	N;		
Species held	Type of facility	Number of facilities					
Has permission been s ought Scottish Government / DSFB o	Ye	S			No		
If yes, please provide an appl date of application:							

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## Please list all waters within the fishery complex

## (a map should be provided showing all waters within the fishery complex)

			Water type			
		(please	e ✓ all approp	Screens in place (✓)		
Name of water	Size (e.g. 10 hectares / 3 mile river)	Still water fishery (connected to a watercourse or situated in a flood plain)	Still water fishery (unconnected to a watercourse)	River fishery	Inlet (upstream)	Outlet (downstream)

# 4. Species present (in any of the fishery waters)

Coarse fish	(√)		(√)	Salmonids	(~)	Crayfish	(~)
Crucian carp		Pike		Rainbow trout		Native	
Carp / crucian hybrids		Perch		Brown trout		Signal	
Crucian / goldfish hybrids		Rudd		Tiger trout		Narrow clawed	
						(Turkish)	
Goldfish		Barbel		Brook trout / charr		Noble	
Orfe / ide		Bream		Atlantic salmon		Spiny cheeked	
Gudgeon		Chub		Arotio oborr		Red swamp	
Roach		Tench		Arctic charr		Crayfish present (species unknown)	
Eel		Sturgeon /		Additional specie	s (ple	ase specify)	
		sterlet					
Dace		Wels catfish					
Grass carp		Zander					
Common carp and							
varieties (including							
koi, mirror, common,							
king and leather)							

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#### 5. Comments

REGULATION 12(4) AND 12(5) OF THE AQUATIC ANIMAL HEALTH (SCOTLAND) REGULATIONS 2009 MAKE IT AN OFFENCE FOR AN OPERATOR (OF A STOCKED FISHERY) TO FAIL TO NOTIFY SCOTTISH MINISTERS, IN WRITING, OF ANY CHANGE TO INFORMATION SUPPLIED IN THIS APPLICATION, WITHIN 30 DAYS OF THE CHANGE.

For this purpose, it is recommended that a copy of your application is retained for your records.

#### REGULATION 12(6) OF THE AQUATIC ANIMAL HEALTH (SCOTLAND) REGULATIONS 2009 MAKES IT AN OFFENCE FOR A PERSON TO PROVIDE INFORMATION THAT IS FALSE, AND WHICH THAT PERSON KNOWS OR SUSPECTS IS FALSE.

I declare that the information I have supplied is accurate to the best of my knowledge.									
Signature:		Date:							
Name:		Position held:							

### For Official Use Only

Business registration no:	F	I	В			Date Registered:		INITIAL
Site reg no:	F	Ι	S			Site category	FIS	
Site location						-		

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