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| **FORM BC4** | **BUSINESS SCISSION APPLICATION** |

Basic Payment Scheme (BPS)

Form BC4 should be used to notify the Department of a business scission (split) with a request to have the entitlements held by the original farm business (the transferor) divided and transferred to the new businesses (the transferees) created as a result of the scission.

**You do not complete Form TE1 – Transfer of BPS Entitlements application, nor can you use the online application to transfer entitlements involved in a scission.**

**Each new farm business created as a result of a division of a farm business will also require Form FB1 – DAERA farm business identifier application – to be completed.**

**If you want the business scission to take place for this BPS scheme year the Form BC4 should be received by DAERA no later than 15 May.** **If 15 May falls on a Saturday, Sunday or Bank/Public Holiday the Department will accept applications on the next working day.**

**Section 6 of the Form BC4 should be completed and signed by all members of the original farm business and the member(s) of each farm business created as a result of the scission.**

If you applied to the BPS in 2015 but have not yet received a final decision on whether you have established entitlements, it would be advisable **not to proceed** with the business scission until a decision has been made by DAERA on the allocation of entitlements.

You should contact the Area-based Schemes Payments Branch on 0300 200 7848 **immediately** for further advice.

Agents/authorised persons who complete a scission / transfer application on behalf of a transferor (the original farm business) **MUST** enter the Entitlement Transfer ID of the transferor and transferee in the relevant sections of the transfer application. An agent / authorised person must obtain the Entitlement Transfer ID directly from the transferor and transferee.

**Note:**

If an agent / authorised person has completed the scission / transfer application on your behalf it is still your responsibility to ensure that the form(s) is / are submitted to us on time and that the information provided is correct. We will consider the information on the form to have been provided in accordance with your wishes. If we have any queries we will contact the authorised agent.

Failure to submit the necessary documentary evidence in support of a business scission / application to transfer entitlements as a result of the scission may result in the application being rejected.

Before completing Form BC4 you are advised to read the ‘Guide to Business Change’, particularly where:

* You have nominated an authorised person to act on your behalf.
* An EJO or Bankruptcy Order exists against you. If the Order restricts the transfer of assets, including payment entitlements, Form BC4 may be rejected.
* There are outstanding debts / penalties exist against the original business.

It is envisaged that this form will cover the majority, but not all, of the situations likely to occur in Northern Ireland. If you feel that this form does not adequately cover your situation you should contact Area-Based Schemes Payment Branch on 0300 200 7848 and seek further advice.

You should read the Guide to Transfer of BPS Entitlements and the Guide to Business Change, available on the DAERA website, for further advice:

<https://www.daera-ni.gov.uk/articles/area-based-schemes-2020-guidance-and-forms>

**Please note you are transferring entitlements to the farm businesses formed as a result of the scission at your own risk.** All parties should be aware that if, after we finalise a transfer, we discover that the entitlements should not have been transferred, the transfer may be ruled null and void and the entitlements returned to the business which originally possessed them. Repayment, with interest, of any monies not due to either party will be required.

The completed Form BC4 should be returned, together with the relevant supporting documentation to:

**Department of Agriculture, Environment and Rural Affairs**

**Area-Based Schemes Payments Branch**

##### Orchard House

##### 40 Foyle Street

## Derry/Londonderry

## BT48 6AT

The Department will acknowledge receipt of your application form within 3 days of receipt. If you have not received an acknowledgement letter within 10 days from the date of posting please telephone Area-Based Schemes Payment Branch on 0300 200 7848 without delay.

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| **SECTION 1** | **ABOUT THE BC4 SCISSION APPLICATION** |

This Form BC4 application should be completed if an original farm business is dividing into 2 or more separate businesses.

A scission occurs when a business is split creating either:-

* at least 2 new separate businesses, of which at least one remains controlled in terms of management, benefits and financial risk by one of the persons (legal or natural) who managed the original business;

or

* at least one new business, the other one remaining controlled in terms of management, benefits and financial risks by the original business.

**Each new farm business created as a result of a division of a farm business will require a Form FB1 – DAERA farm business identifier application, to be completed and returned. Each new farm business must be registered and approved with us as a category 1 business before the entitlements belonging to the original farm business can be split between the newly created businesses.**

Form BC4 should provide details of how the entitlements held by the original business is to be shared between the original business and the new separate farm business(es) created as a result of the scission.

The following sections of the Form BC4 **must be completed**:

**Section 2 -** Details of the original farm business.

**Section 3 -** Details of the farmer(s) managing the farm businesses created as a result of the scission.

Section 4 - Allocation of the payment entitlements following the scission.

Section 5 - Date of scission

Section 6 - Declarations and Undertakings

Section 7 - Personal Privacy Notice

If you need help with any of the questions you can contact the Area-based Schemes Payment Branch on 0300 200 7848 for advice.

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| **SECTION 2** | **DETAILS OF THE ORIGINAL BUSINESS** |

|  |  |
| --- | --- |
| **CATEGORY 1 BUSINESS ID:** |  |
| **BUSINESS TRADING NAME:** |  |
| **NAME OF THE PERSON(S) TO WHOM PAYMENT WILL BE MADE, IF THIS IS DIFFERENT FROM THE BUSINESS TRADING NAME.** |  |
| **DATE OF BIRTH:** |  |
| **BUSINESS ADDRESS**: | |
| **POSTCODE:** |  |
| **PHONE NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **E-MAIL:** |  |

|  |  |
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| **SECTION 3** | **DETAILS OF THE MEMBERS OF EACH BUSINESS CREATED AS A RESULT OF THE SCISSION** |

**Business No 1:**

|  |  |
| --- | --- |
| **CATEGORY 1 BUSINESS ID NUMBER:** |  |
| **BUSINESS TRADING NAME:** |  |
| **NAME OF THE PERSON(S) TO WHOM PAYMENT WILL BE MADE, IF THIS IS DIFFERENT FROM THE BUSINESS TRADING NAME.** |  |
| **DATE OF BIRTH:** |  |
| **BUSINESS ADDRESS**: | |
| **POSTCODE:** |  |
| **PHONE NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **E-MAIL:** |  |

List the details below of **all** members of Business No 1.

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

**Continue on a separate sheet as necessary.**

**Business No 2**

|  |  |
| --- | --- |
| **CATEGORY 1 BUSINESS ID NUMBER:** |  |
| **BUSINESS TRADING NAME:** |  |
| **NAME OF THE PERSON(S) TO WHOM PAYMENT WILL BE MADE, IF THIS IS DIFFERENT FROM THE BUSINESS TRADING NAME.** |  |
| **DATE OF BIRTH:** |  |
| **BUSINESS ADDRESS**: | |
| **POSTCODE:** |  |
| **PHONE NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **E-MAIL:** |  |

List the details below of **all** members of Business No 2, including the person to whom payment will be made, as named above.

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

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| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

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| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

**Continue on a separate sheet as necessary.**

**Business No 3**

|  |  |
| --- | --- |
| **CATEGORY 1 BUSINESS ID NUMBER:** |  |
| **BUSINESS TRADING NAME:** |  |
| **NAME OF THE PERSON(S) TO WHOM PAYMENT WILL BE MADE, IF THIS IS DIFFERENT FROM THE BUSINESS TRADING NAME.** |  |
| **DATE OF BIRTH:** |  |
| **BUSINESS ADDRESS**: | |
| **POSTCODE:** |  |
| **PHONE NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **E-MAIL:** |  |

List the details below of **all** members of Business No 3, including the person to whom payment will be made, as named above.

|  |  |  |
| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

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| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

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| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

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| --- | --- | --- |
|  | **Applicant Ref No:** |  |
|  | **Forename(s):** |  |
|  | **Surname:** |  |
|  | **Date of Birth:** |  |
|  | **Address:** |  |
|  | **Tel No:** |  |

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| **SECTION 4** | **ALLOCATION OF THE PAYMENT ENTITLEMENTS FOLLOWING THE SCISSION** |

**How are payment entitlements to be split between the farm businesses created as a result of the scission?**

The table below should be completed to show how the entitlements should be split between the new farm businesses.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Original Business** | **New Business No 1** | **New Business No 2** | **New Business No 3** |
| **NUMBER OF ENTITLEMENTS TO BE TRANSFERRED** |  |  |  |  |
| **UNIT VALUE OF ENTITLEMENTS TO BE TRANSFERRED** |  |  |  |  |

* Have you completed Form FB1 – DAERA business identifier - ❑ Yes ❑ No

to apply for a new farm business ID?

If No –

We cannot transfer entitlements or pay BPS to a new farm business unless you are registered with us and hold a category 1 business ID. As the registration process can take time, you are strongly advised to submit a Form FB1 immediately.

If Yes -

If you have applied on Form FB1 for approval as a new farm business, please confirm the date Form FB1 was submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For the business scission to take effect for this BPS scheme year you must submit a Form FB1 on or before 15 May.

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| **SECTION 5** | **DATE OF SCISSION** |

We will normally take the date of the scission as the date we received this form. If you want us to consider a different scission date please tell us here.

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(***must be on or before 15 May***)

**Evidence detailing the nature of the transfers, such as a Deed of Transfer, a Lease Agreement or any similar legal document relating to the division of the business, should be submitted with this application.**

You should be aware that this application will be assessed in order to determine whether the new businesses are separate from each other and the original business.

**Note:**

If you have already provided documentary evidence listed above in relation to an earlier assessment of the business scission, you do not have to resubmit the evidence. In such cases you should indicate below the documents sent to DAERA, when they were sent and provide a copy of any related correspondence from DAERA.

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| Details of evidence already submitted to DAERA: |

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| List of documents enclosed with this application: |

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| **SECTION 6** | **DECLARATION AND UNDERTAKING** |

***If applicable, references within the declaration to EU regulations and legislation are to be taken as references to those provisions, as retained in UK law for 2020 scheme year by the Direct Payments to Farmers (Legislative Continuity) Act and corresponding secondary legislation.***

The Declaration MUST be signed by all members of the original farm business.

For any new farm business it may be signed by one representative of each business created if the scission has resulted in a multi-member business.

DECLARATION:

* I/We request that this application be considered under the business scission arrangements pertaining to the BPS.
* I/We declare that the information given by me/us in this Form BC4 application is true and complete to the best of my/our knowledge and belief.
* I/We have enclosed all relevant documents relating to this application.
* I/We wish to transfer BPS entitlements by way of a business scission as detailed in Section 3 of this Form BC4.
* I/We are aware that if, at a later date, it is found that the original business was incorrectly allocated entitlements under the BPS, these entitlements will have to be recovered or their value amended.
* I/We are aware of the conditions pertaining to the BPS and have complied with them.
* I/We are farmers carrying out agricultural activity on a holding within the meaning of Articles (4)(1)(a), (b) and (c) and Regulation (EU) No. 1307/2013 as set out in the ‘2019 Guide to the Basic Payment Scheme’.
* I/We have read and understood all of the relevant guides.

I/We undertake:

* To provide any additional information relating to this application that DAERA may reasonably require.
* To advise DAERA of any material change to the information given on this Form BC4.
* To comply with EU Regulations as incorporated into domestic law and any other applicable legislation governing the BPS and the Single Application process.
* To discharge any debt or penalty currently owed by the original business, or any debt or penalty which is subsequently applied by DAERA to the original business.

**MEMBERS OF THE ORIGINAL FARM BUSINESS**

|  |  |
| --- | --- |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |

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| **Signed:** |  |
| **Print Name:** |  |
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| **Print Name:** |  |
| **Date:** |  |

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| --- | --- |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |

**Continue on a separate sheet as necessary.**

**REPRESENTATIVE OF THE NEWLY CREATED BUSINESSES**

|  |  |
| --- | --- |
| **On behalf of Business No 1:** |  |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **On behalf of Business No 2:** |  |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **On behalf of Business No 3:** |  |
| **Signed:** |  |
| **Print Name:** |  |
| **Date:** |  |
| **Date:** |  |

**Continue on a separate sheet as necessary.**

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| **SECTION 7** | **PERSONAL DATA PRIVACY NOTICE** |

The Department takes data protection, freedom of information and environmental information issues seriously. It takes care to ensure that any personal information supplied to it is dealt with in a way which complies with the General Data Protection Regulation and the Data Protection Act 2018. This means that any personal information you supply will be processed principally for the purpose for which it has been provided. However, the Department is under a duty to protect the public funds it administers, and to this end may use the information you have provided for this purpose. It may also share this information with other bodies responsible for the audit or administration of public funds, in order to prevent and detect fraud.

In addition, the Department may also use it for other legitimate purposes in line with the Freedom of Information Act 2000, Environmental Information Regulations 2004, and will comply with the General Data Protection Regulation and the Data Protection Act 2018.

These include:

* Administration of the Common Agricultural Policy and other aid schemes;
* Administration of the Common Fisheries Policy;
* The production and safety of food;
* Management of land and other environmental controls;
* Animal health and welfare;
* Occupational health and welfare;
* The prevention and detection of fraud or maladministration (eg The Comptroller & Auditor General and HM Revenue & Customs.);
* Compilation of maps and statistics;
* Disclosure to other organisations when required by law to do so; and
* Disclosure under the Freedom of Information Act 2000 or the Environmental Information Regulations 2004 where such disclosure is in the public interest.

Legislation introduced by the European Commission in 2014 requires Member States to publish details of the amounts paid to CAP beneficiaries. Data will be published for all beneficiaries on a searchable website, and will include the name and locality of the beneficiary and details of the amounts and schemes for which subsidy has been paid. However, for those receiving less than the equivalent of €1,250 in subsidies, the name of the beneficiary will be withheld. Data will be made available from 31 May each year and will cover all payments made in the previous EU financial year (October to October). The data will be updated annually and remain available for 2 years from the date it is published.