DAIRY/STORE CATTLE

NAME AND ADDRESS FROM WHICH CATTLE MOVED HOLDING No:	
	Affix Farm
	Assuran
	ce
	Sticker
AUCTION COMPUTER CODE:	here
Vehicle Reg. No: DATE	

This form must accompany all cattle to market. It can apply to all								
cattle, including calves. Please read the notes below.						TB Pre-movement testing Bluetongue		
· · · · · · · · · · · · · · · · · · ·						oplicable)	Vaccine	
LOT	OFFICIAL EAR TAG NUMBER		OFV		Farm	Frequency of TB Test (1,2,3 or 4	Date of TB	Date
NO.	OFFICIAL EAR TAG NOMBER	BREED	SEX	AGE	Assured Yes/No	yrs)	Movement Test	Vaccinated
	UK							
	UK							
	UK							
	UK							
	UK							
	UK							
	UK							
	UK							
	UK							
	UK							

DECLARATIONS:

1	I hereby declare that I am the owner/owner's agent of the animal(s) described above and that to the
	best of my knowledge the particulars shown on this form at the time of signing are accurate and
	complete

I hereby declare that the Auction Lot Numbers are correctly matched with Official Ear tag Numbers and that any 2 CID/Passport relating to these lot numbers are correctly matched.

3 I hereby that the animals entered on this form are free from any withdrawal periods or have been

vaccinated/treated and are shown on this form.

Date of Treatment(Inc Name of Treatment):.....

Withdrawl Period: I hereby declare that I will

(Please tick where applicable)

Cleanse and disinfect my vehicle and trailer to DEFRA standards on site.

Complete form FW/AM 27 To Undertake to Cleanse & Disinfect vehicle

I CONFIRM THE INFORMATION IS CORRECT, AND THE AUCTIONEERS HAVE NO LEGAL RESPONSIBILITY FOR THE CORRECTNESS OF THE INFORMATION.

Signed:

OR

4

Food Chain Information Declaration - Bovine

The holding **is** under movement restriction for bovine Tuberculosis (TB 1 + 2 PARISHES) **or**

The holding <u>is not</u> under movement restriction for bovine Tuberculosis (TB 3 & 4 PARISHES) (Delete as Applicable)

Cattle on the holding are not under movement restrictions for other animal disease or public health reasons (excluding a 6-day standstill).

The animals have originated from establishments that have received regular animal health visits from a veterinarian for the purpose of the detection of signs of disease.

Withdrawal periods have been observed for all veterinary medicines and other treatments administered to the animals while on this holding and previous holdings.

To the best of my knowledge the animals are not showing signs of any disease or condition that may affect the safety of meat derived from them.

No analysis of samples taken from animals on the holding or other samples has shown that the animals in this consignment may have been exposed to any disease or condition that may affect the safety of meat or to substances likely to result in residues in meat.

Keeper's signature					
Print name					
Date					
If the animals do not fulfil all the above statements, tick this box and provide additional information on an attached document- APPENDIX i					