



PREMIER LIVESTOCK AUCTIONS LTD

STORE CATTLE ENTRY FORM



FROME MARKET 01.01.10
TEL 01373 830033

DATE OF SALE: _____ AFFIX FARM ASSURANCE STICKER HERE

NAME: _____

ADDRESS: _____

POST CODE: _____ TELEPHONE NO: _____

SIGNED: _____ COMPUTER NO: _____

HAULIER: _____ HAULIER ABM NO _____ VEHICLE REG NO: _____

BLUE TONGUE VACCINATION, VACCINATED 2009 YES NO (PLEASE CIRCLE)

2010 1st/ 2010 BOOSTER INJECTION DATE.....VACCINE BATCH NO.....

2010 2nd INJECTION DATE.....VACCINE BATCH NO.....

I HEREBY DECLARE THAT:

- 1) I am the Owner or Owner's Agent of the animals described below.
- 2) The stock show no signs of any notifiable disease.
- 3) The stock comes from a holding which has had no movement of FMD susceptible animals onto it in the 6 days prior to the Market.
- 4) The movement is in accordance with the General Licence Conditions.
- 5) Vehicle has been fully cleansed & disinfected prior to loading of stock.
- 6) Stock complies in full with obligations imposed by the Tuberculosis (England) Order 2007.

HOLDING NUMBER:

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PLEASE ENSURE ALL CATTLE ARE DOUBLE TAGGED

TB TEST STATUS 12 24 36 48 MONTHS (PLEASE CIRCLE)

DATE OF PREMOVEMENT TB TEST _____

LOT NO	BREED	STEER/HEIFER BULL/COW	EAR NUMBER	DOB	REGISTERED PEDIGREE SIRE NAME ONLY	RESERVE

Are the animals on this form still within a medicine withdrawal period?

Yes No

If YES please give precise detail of product administered and date of end of withdrawal period.

Product:

Date Given

Withdrawal Period

Date Withdrawal Period Ends