

TB REGULATIONS

TB PARISH TESTING INTERVAL PLEASE TICK

1 - 2 YEARS

3 - 4 YEARS

I DECLARE THAT THE CATTLE LISTED OVERLEAF ARE:- PLEASE TICK THE RELEVANT BOX

- Young Calves **UNDER 42 DAYS OLD**
- From a holding in a parish with a 3 or 4 year testing interval
- 42 Days and over from a holding in a 1 or 2 year testing interval **and have NOT been tested**
- 42 Days and over from a holding in a 1 or 2 year testing interval **and had a clear TB test on.....(WITHIN THE LAST 60 DAYS)**
You should be in possession of the relevant TB Test Chart from your vet

2010 FOOD CHAIN INFORMATION DETAILS

DECLARATIONS

1. I hereby declare that I am the owner/owner's agent of the animal(s) described overleaf and that to the best of my knowledge the particulars shown on this form are true and complete.
2. The animals on the holding are not under any movement restrictions for any animal disease or public health reasons
3. Withdrawal periods have been observed for all veterinary medicines and other treatments administered to the animals while on this holding and previous holdings
4. 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.
5. 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.
6. I further declare that the animals are correctly marked and are tagged with official UK tags and any documentation corresponds to the relevant ear tags.
7. I hereby confirm that the stock comes from a premises which has had no movement of animals onto it in the previous 6 days (other than the permitted exceptions).

Signed.....Print Name

Date.....

VEHICLE CLEANSING AND DISINFECTION

VEHICLE REGISTRATION NUMBER _____ (if using a haulier their vehicle registration must be entered here)

I declare that the vehicle registered above will be cleaned and disinfected in accordance with the Transport of Animals C & D Order at the following premises:-

Market

Farm

C & D Centre

Signed by driver of vehicle registeredDate

DERBY MARKET AUCTIONS

THE CATTLE MARKET, CHEQUERS ROAD, DERBY, DE21 6EP

TEL. (01332) 342108 FAX. (01332) 345616

PLEASE COMPLETE ALL DETAILS

CUSTOMER A/C No. (if known)DATE OF SALE.....

NAME.....

ADDRESS.....

.....POST CODE.....

TEL. No.MOBILE.....

HOLDING NUMBER...../...../.....

FARM ASSURANCE
AND EXPIRY DATE

AFFIX STICKER HERE

UNLESS THIS BOX IS
COMPLETED CATTLE
WILL BE SOLD AS
NOT FARM ASSURED

	AUCTION LOT NO	STR/HFR BULL/COW	OFFICIAL EAR TAG NUMBER			DATE OF BIRTH	BREED
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

• • • PLEASE SIGN AND DATE YOUR PASSPORTS • • •

• • • THE DECLARATIONS ON THE REVERSE OF THIS FORM MUST BE SIGNED
BEFORE STOCK CAN BE ACCEPTED AT THE MARKET • • •