



HARRISON & HETHERINGTON

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OFFICIAL ENTRY FORM FOR CALVES

This Form Must Accompany All Calves to the Market

PLEASE NOTE IT IS AN OFFENCE TO SELL CALVES UNDER SEVEN DAYS OLD

DATE OF SALE:

Table with 6 columns: LOT NUMBER, EAR No., BREED, SEX, DATE OF BIRTH, REMARKS. Includes instruction: Please declare named Sire details

- a) None have been brought to a Market before this day
b) None have been brought to a Market once during the previous 28 days
Address of Mart:
c) That the Calf is from a herd where there is no case, nor has been for 3 years, of EBL Notified or Confirmed

Must complete both sides of this form

BVD DECLARATION

Table with 3 columns: Category, Standard, Please indicate category. Categories include BVD Category 1, 2, and 3.

TB STATUS Please complete ALL the following questions:-
1. Are you currently subject to a yearly or 3km surveillance test?
2. Date of your last routine herd test?
3. Has your herd ever had a TB breakdown?
FARM ASSURANCE STATUS
Place Farm Assured sticker here

HOLDING No.
NAME
ADDRESS
Postcode
TEL/MOBILE NO.
EMAIL

Are you an ARLA Member YES NO
If so, these animals MUST NOT be euthanized under 8 weeks (56 days) in line with ARLA standards.

THE REVERSE OF THIS FORM MUST BE COMPLETED & SIGNED (CATTLE WILL NOT BE PROCESSED WITH INCOMPLETE FORMS)

FOOD CHAIN INFORMATION (FCI)

1. Animals on the holding are not under movement restrictions for other animal disease or public health reasons (excluding a 6-day [Scotland 13 day] standstill).
2. 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.
3. 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.

If the animals do not fulfill all the above statements, tick this box and provide additional information below

- | | | | | |
|--|------------|--------------------------|-----------|--------------------------|
| 4. Have withdrawal periods for veterinary medicines and other treatments been met? | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 5. Have any calves in the consignment been treated with any veterinary medicinal products or other treatments in the past 28 days?
<i>If 'Yes', please provide details below.</i> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 6. Are any calves showing signs of abnormality?
<i>If 'Yes', please provide details below.</i> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |

Veterinary medicinal products or other treatments administered to calves in the consignment			
Ear Tag Number			
Name of Medicine or Product			
Date of Administration			
Withdrawal Period			
Reason for Administration			

Information about animals showing signs of a disease that may affect the safety of meat derived from it/them	
Identification of animal(s) – or attach list	

Describe the disease or condition, or diagnosis if a veterinary surgeon has examined the animal(s)

Information about holding restrictions or results of analysis of samples relevant to public health

Veterinary Practice responsible for the holding	Name: Telephone:
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TRANSPORT DETAILS / CLEANSING AND DISINFECTION

Vehicle Registration Number(s)	
Name of Haulage Company: (If Applicable)	
Drivers Name & Address: (If Applicable)	
Are you cleansing and disinfecting on these premises? YES <input type="checkbox"/> NO <input type="checkbox"/>	

- Declare:
- I am the person responsible for the care and control of the animals to be moved and have responsibility for maintaining records relating to their movement
 - I am the person that has examined the stock and seen no signs of any notifiable diseases
 - that the stock comes from a premises which has had no movement of animals onto it in the previous 6 days (other than permitted exceptions)
 - that the movement complies with the relevant general licence
 - I am the legal owner of the animals listed

I DECLARE THAT THE DETAILS I HAVE INCLUDED ON THIS FORM AT THE TIME OF SIGNING ARE TRUE AND CORRECT

Signed