

British Blue Cattle Society Official Sale Herd Health Declaration

HOLDING (CPH NUMBER):	ŀ	HERD PREFIX:	
NAME:			FELEPHONE NO:	
ADDRESS:				
SALE DATE	:			
		BOVINE		
DATE HERD LAST TESTED CLEAR:			TESTING INTERVAL	L 1 YEAR 3 YEARS 2 YEARS 4 YEARS
		HEALTH S	CHEME	
SAC F	NDICATE WHICH HEALTH SCH Premium Cattle Health Schen Advance Cattle Health Scher r (please name)	ne 🔲 Biobest Hi He	alth Herdcare] NML Herdwise
TICK WHI	CH DISEASES APPLY:	☐ JOHNES □	BVD 🗌 IBR	LEPTO
	ALL VEND	DRS MUST COMP	PLETE THE FOI	LOWING
	Accredited free (CHeCS members only)	Herd Testing		n of Sale Animals only
BVD	☐ Yes ☐ No If yes, since:	☐ Yes ☐ No If yes, since:	☐ Yes	Vaccine – Bovidec/Bovilis (Delete as applicable)
IBR	☐ Yes ☐ No If yes, since:	☐ Yes ☐ No If yes, since:	☐ Yes □ No	If yes, name of Vaccine:
LEPTO	☐ Yes ☐ No If yes, since:	☐ Yes ☐ No If yes, since:	☐ Yes □ No	If yes, name of Vaccine:
JOHNES	Risk Level (Consult your Health Scheme) Risk Level 1 Accredited Risk Level 2 Risk Level 3 Risk Level 3 Risk Level 4 Risk Level 5 Risk Level 5		□ Yes □ No	If yes, name of Vaccine:
applicable if r negative for b	the above information is correct at not BVD Accredited) and blood/PCR	date of entry. The animal/ R tested for Johnes (not app e blood test results, are av	olicable if Risk Level 1 (A vailable on request. All	y screened for BVD virus, to identify PI's (onl accredited) or under 12 months) and were te sale animals entered are BVD vaccinated. if applicable.
Signed:		Name:		Date:
Disclaimer: Ti		e Society, Holme House, Da the vendor and the Auctio		A4 9RH Tel: 01768 870522 ht responsible for the accuracy of this inform