



SALE CARDS

Application for Bovine Health Declaration(s)



Seller	Veterinary Practice
Name:	Name:
Address:	Address:
Telephone:	Telephone:
Fax:	Fax:
Email:	Email:
CPH:	
Location and Date of Sale:	
(If certificates are required for multiple sales please use a separate form for each different sale)	

- **WHERE LESS THAN 2 WEEKS' NOTICE IS GIVEN WE CANNOT GUARANTEE THAT WE WILL BE ABLE TO PRODUCE A SALE CARD AT ALL**
- **ADDITIONAL CHARGES WILL BE APPLIED WHERE LESS THAN 2 WEEKS' NOTICE IS GIVEN FOR A SALE CARD WHERE NO TESTING IS REQUIRED**
- **WHERE TESTING IS NECESSARY, AT LEAST 1 MONTHS' NOTICE IS REQUIRED**
- **WHERE ANIMALS ARE AT LIVERY THE HERD STATUS OF THE HERD OF ORIGIN WILL NOT BE PRESENTED ON THE SALE CARD UNLESS THE ANIMALS ARE MAINTAINED IN ISOLATION AT LIVERY (Signature Required)**

Are the animals at livery prior to the Sale? Yes No

I confirm that the animals are in isolation compliant with CHECS rules when at livery Yes No

Signed by Vet: _____

Print name: _____

Declarations will only be produced for animals that are either from a BVD accredited herd or have been individually tested for BVD antibody and for the presence of BVD virus and found to be negative. Animals should be blood tested between 4 and 12 weeks before the sale; this applies for BVD antibody, L hardjo antibody and IBR antibody.

Note: there is no need to individually test any animal for a disease for which you hold Accredited Status with the HiHealth Herdcare Scheme.

TB Test Information		
TB testing interval:	Date of last herd TB test:	Date of last sale animal individual TB test:

Owner Declaration: I confirm that the information provided is, to the best of my knowledge, correct.

Signature _____ Name _____ Date _____

Vet Declaration: I confirm that the information provided is, to the best of my knowledge, correct.

Signature _____ Name _____ Date _____



Please fully complete this form for all animals that you require pen cards for.

Animal Details						Tests Required						Vaccine Details/Dates						
Ear Number	Name	Breed	Sex (M/F)	Homebred? (Y/N)	In Calf or Calf at foot? (IC/CAF)	Bio best Number	BVD Ab	BVD Ag	IBR Ab	IBRgE Marker	Leptospirosis	Johne's Disease*	Bovilis	<input type="checkbox"/>	Vaccine Name:		Leptavoid	<input type="checkbox"/>
													Bovidec	<input type="checkbox"/>	Bovela	<input type="checkbox"/>	BVD 1 st Dose	BVD Booster

***Note: only the herd status for Johne's disease is show on the certificates. Certificates will not be produced for Johne's antibody positive animals.**

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