North East Livestock Sales

ACKLINGTON MART, ACKLINGTON, MORPETH, NE65 9BU
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MOVEMENT OF CATTLE

LOT NUMBER	OFFICIAL EARTAG NUMBER	BREED	SEX	AGE/DOB

I HERE BY DECLARE THAT:

- I AM THE OWNER OR THE OWNERS AGENT OF THE ANIMALS DESCRIBED ABOVE AND THAT THE DETAILS GIVEN ON THIS FORM ARE CORRECT.
- THE OWNER/AGENT HAS EXAMINED THE STOCK AND SEEN NO SIGNS OF FMD OR OTHER NOTIFIABLE DISEASE.
- THE STOCK COMES FROM PREMISES THAT HAS HAD NO MOVEMENT OF FMD SUSCEPTIBLE ANIMALS ONTO IT IN THE PREVIOUS 6 DAYS (OTHER THAN PERMITTED EXCEPTIONS).
- THE MOVEMENT COMPLIES WITH THE RELEVANT GENERAL LICENCE.

TB TESTING:

TEST FREQUENCY **12 MTH - 24 MTH - 36 MTH - 48 MTH**

PRE-MOVEMENT TESTED **YES/NO** DATE TESTED _____

BLUE TONGUE VACCINATED **YES .....NO.....** *Tick as Applicable*

VACCINATION USED: MERIAL OR INTERVET First Dose / Second Dose *Tick as Applicable*

SIGNED: _____ **HOLDING NUMBER:** _____

NAME: _____ **VEHICLE REG NO:** _____

ADDRESS: _____ **DATE:** _____

_____ **FARM ASSURANCE NO:** _____