

Signature

SALE CARDS

Application for Bovine Health Declaration(s)



	Seller			Veterinary Practice									
Name:			Name:										
Address:			Address:										
Telephone:			Telephone:										
Fax:			Fax:										
Email:			Email:										
СРН:													
Location and Da (If certificates a form for each d	are required for multiple sales pleas	se use a separate											
re the anima	HE ANIMALS ARE MAINTAIN Is at livery prior to the Sale the animals are in isolation	?			•	YES YES	NO NO						
	Signed by vet:												
	Print name:												
for BVD antib and 12 weeks	will only be produced for a body and for the presence of s before the sale; this applic s no need to individually te	of BVD virus and four es for BVD antibody,	nd to be negativ L hardjo antibo	ve. Animody and	nals should IBR antiboo	be blood t ly.	tested between 4						
Herdcare Sch	eme.												
TB Test Info	T	T	1										
TB testing interva			ale animal test:										
Owner Declai	ration: I confirm that the inf	ormation provided is	, to the best of	my knov	wledge. cor	ect.							
Signature		Nar	1		<u> </u>	Date							
	on: I confirm that the inform	ation provided is to	the best of my	knowlo	dan correct		<u> </u>						

Name





Animal Details						Tests Required								Vaccine Details/Dates						
	Name	Breed	Sex (M/F)		AF)		BVD Ab	BVD Ag	IBR Ab	IBRgE Marker	Leptospirosis	Johne's Disease*	Bovilis Bovidec Bovela		Vaccine Name:					
Ear Number				Homebred (Y/N)	t foot (IC/C	Biobest Number											Leptavoid Spirovac			
Lai Nullibei					In calf or Calf at foot (IC/CAF)	biobest Number							BVD 1st Dose	BVD Booster	IBR 1st Dose	IBR Booster	Lepto 1st Dose	Lepto 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.