

NATIONAL CATTLE HEALTH DECLARATION

V: 02/05/18

Property Identification Code (PIC) of this property
This MUST be the PIC of the property that
the stock is being moved from

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Attached to accompanying NVD/Waybill No.

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Biosecurity and health information

1. Has the owner stated above owned all the cattle in this
consignment since birth? Y N

2. Does the property of origin have a completed on-farm biosecurity plan? Y N

3a. Have these cattle been tested for the presence of pestivirus antigen?
If tested, were any cattle found to be persistently infected? Y N
Y N

3b. Have these cattle been tested for the presence of pestivirus antibody?
If tested what percentage of the tested cattle were antibody positive? Y N
Y N

4. Has the property of origin had an occurrence of clinical
Johne's disease (JD) in any species in the past five years? Y N Unsure
J-BAS of (Optional)

5. On the property of origin, have cattle been co-grazed with
dairy cattle? Y N Unsure
See explanatory note for advice on co-grazing with non-bovine species

6. Has the source herd had a JD test? Y N Pending
If so, which test? Check Test Sample Test Date / /
Was the result negative? Y N

7. If dairy cattle, the consignment has
a Dairy Assurance Score of: Part A (herd base score) Part B (calf credits) Part C (total Dairy Score)

8. Any other relevant health information
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Please refer to www.farmbiosecurity.com.au for all explanatory notes

Treatments

Treatment type	Product	Date of treatment within last 6 months
Drench or pour-on		
Liver fluke		
Other treatments		

Current vaccinations for the cattle being moved (see explanatory note)

Clostridial (e.g. 5 in 1): Y Botulism: Y

Leptospira (e.g. 7 in 1): Y Bovine ephemeral fever: Y

Pestivirus: Y Tick fever: Y

JD (Sillirum): Y Vibrio: Y

Other vaccinations (specify):
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Declaration (see explanatory notes for further information)

I
(Full name)

.....
(Address)
(Town/suburb)
(State)
(Postcode)

declare that I am the owner or the person responsible for the husbandry of the cattle and that all the information in this document is true and correct. I also declare that I have read and understood all the questions that I have answered, that I have read and understood the explanatory notes, and that I have inspected the animals and deem them to be healthy, free of signs of disease and fit to travel.

Signature*
*Only the person whose name appears above may sign this declaration, or
make amendments which must be initialed

Tel. No. ()
Email