



**HIGHLAND MEATS**  
A DIVISION OF DAWN MEATS (UK) LTD.

**Highland Meats**  
(A Division Of Dawnmeats UK) Ltd  
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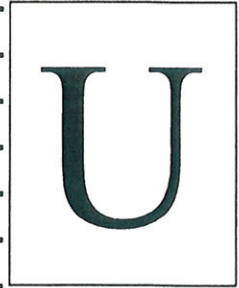
**Pay to: Border Livestock ex BOR005**

**U48M CATTLE FCI (Food Chain Information) FORM & PAYMENT DETAILS**

\*\*\*\*Livestock without this form filled in correctly cannot be slaughtered\*\*\*\*

**MOVEMENT DATE:** \_\_\_\_\_  
**CONSIGNOR:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
**EMAIL:** \_\_\_\_\_

**QUANTITY OF STOCK:** \_\_\_\_\_  
**FA NUMBER:** \_\_\_\_\_  
**DATE OF LAST AUDIT:** \_\_\_\_\_  
**HOLDING NO:** \_\_\_\_\_  
**PHONE NO:** \_\_\_\_\_  
**FAX NO:** \_\_\_\_\_



**PLEASE NOTE TO QUALIFY AS SCOTCH, CATTLE MUST BE FARM ASSURED IN SCOTLAND FROM BIRTH.**

	S=Steer / H=Heifer YB=Ybull / B=Bull C=Cow	EARTAG NUMBER	ABERDEEN ANGUS SIRE DETAIL	DATE OF BIRTH	BREED
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

**Load Time:** \_\_\_\_\_ **Load Date:** \_\_\_\_\_ **Haulier:** \_\_\_\_\_ **SFQC Haulier No:** \_\_\_\_\_

**Declarations**

- Is the holding under movement restrictions for Bovine Tuberculosis? Yes No
- Is the holding under movement restrictions for any othe animal disease or public health reasons? Yes No
- Are any of the animals stated above still within a withdrawal period for any veterinary treatments administered to the animals while on this holding and previous holdings? Yes No
- To the best best of your knowledge, are any of the animals stated above suffering from any disease or condition that could affect the safety of meat derived from them? Yes No

**If you have answered YES to any of the above statements, please provide additional information on the Additional Food Chain Information Sheet (on the back)**

**I DECLARE THAT NONE OF THE CATTLE ON THIS CONSIGNMENT ARE EITHER CLONED OR PROGENY OF CLONED CATTLE**

**Signed:** \_\_\_\_\_ **Printed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ADDITIONAL FOOD CHAIN INFORMATION**

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**Details of Holding Restrictions for Animal Health or Other Reasons**

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**Information about animals believed to be suffering from disease or Condition that may affect the safety of meat derived from these animals**

Fill In Ear Tag Numbers Of Affected Animals	

**Describe the disease or condition, or diagnosis if a veterinary surgeon has examined the animal(s)**

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**Record all veterinary medicines and other treatments with a withdrawal period greater than zero administered within the previous 60 days**

Name of Medicine or Product	Date of Administration	Withdrawal Period

**Details of analysis of samples taken from animals on the holding or other samples that have shown that the animals in this consignment may have been exposed to any disease or condition that may affect the safety of meat, or to substances likely to result in residues in meat**

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To the best of my knowledge, the details stated above are correct.

Signed:

Printed:

Date: