

Agent Details:


**ABERDEEN ANGUS
CATTLE ENTRY FORM**
Dunbia – Cattle Food Chain Information Form
Contains Legal Requirements – If not completed correctly animals may not be processed.

Producer Name and Address:		Contact Number:	
		Email Address:	
		Holding Number:	
Number of cattle:		Farm Assurance Number:	
If cattle are organic tick this box and attach certificate <input type="checkbox"/>		Organic Number:	
Haulier:	Vehicle Registration:	Trailer ID:	ABM:
Load Date & Time Farm:	Unload Date & Time Collection Centre:	Load Date & Time Collection Centre:	Unload Date & Time Abattoir:

Declarations (please circle yes or no)
If you answer YES to any of the statements below, please provide additional information in the relevant section below:

Is the holding under movement restrictions for Bovine Tuberculosis (TB)? (If yes attach licence)	Yes	No
Is the holding under movement restrictions for any other animal disease or public health reasons (excluding a 6-day standstill)?	Yes	No
Are any of the animals listed still within a withdrawal period for any veterinary treatments and other treatments administered to the animals while on this holding and previous holdings?	Yes	No
To the best of your knowledge, are any of the animals listed above suffering from any disease or condition that could affect the safety of meat derived from them or affect the welfare of the animal?	Yes	No
I declare that none of the cattle in this consignment are either cloned or progeny of cloned cattle.		
I declare that the cattle listed have not been fed growth promoters/digestive enhancers since 1st January 2001.		
I declare that the cattle delivered have been on a farm assured holding for the minimum period of time (90 days) required by the farm assurance standards and where appropriate, meet the requirements of the West Country PGI status.		
I declare that Scotch cattle (Highland Meats) have been on a QMS holding from birth to death.		
I declare I have correlated all ear tags with the passports supplied and therefore hold all responsibility for any animals delivered with incorrect passports and missing ear tags.		
I declare that no analysis of samples taken from animals on the holding or other samples have shown, that the animals on this list may have been exposed to any disease, condition or substance that may affect the safety or result in residues in the meat.		

West Country PGI Declaration

During their lifetime these cattle have been fed 70% forage-based diet and have received a suitable period of grazing of a very minimum of 6 months (Supplements may have been fed at weaning and finishing stage, purchasing records must be maintained on the animal feeding log). Cattle must have been finished for a minimum of 60 days. I understand that information from my farm assurance assessment may be required to check the PGI eligibility of the farm and I hereby give permission for my contracted certification body and Red Tractor Assurance to provide that information to the PGI appointed compliance body if requested.

Details of Holding Restrictions for Animal Health or Other Reasons
Information about animals believed to be suffering from a disease or condition that may affect the safety of meat derived from these animals OR affect the welfare of the animal.

 Fill in ear tag numbers of affected animals:

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Describe the disease, 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 in the previous 60 days. Have, to your knowledge, any quinolones, colistins or 3rd/4th generation cephalosporins been used in any of the animals lifetime? If yes provide details below.

Eartag Number	Name of Medicine 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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Please complete information below **OR** attach a copy of consignment information with official eartag numbers, DOB and Breed.

	Category Steer / Heifer	Official Ear Tag Number If ear tag details are attached on a separate form, tick this box <input type="checkbox"/>	Aberdeen Angus Sire Details If ear tag details are attached on a separate form, tick this box <input type="checkbox"/>	DOB	Breed
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Please detail what these animals have eaten in the last 30 days or the length of time on your holding if less than 30 days (tick as appropriate)

Protein Concentrate Grass/Silage Grain Compound Non-UK grown maize & derivatives Non-UK grown soya & derivatives

Have cattle in this consignment grazed for a minimum of six months? (Please circle) **Yes No**

Name of feed supplier(s):

UFAS Number:

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

I declare that the livestock were fit to travel at the time of loading and fit for the intended journey.

Signed:		Printed:		Date:
Slips(s) at loading:	Falls(s) at loading:	I declare that the cattle were fit to travel at the time of loading and fit for the intended journey. Signature of Haulier.....		

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