

# CATTLE HEALTH DECLARATION

Owner of cattle (full trading name)	
Address of property/place where journey will commence	
	State
	Postcode

<b>PROPERTY IDENTIFICATION CODE (PIC) OF THIS PROPERTY</b> This MUST be the PIC of the property that the stock is being moved from
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DETAILS OF OTHER STATUTORY DOCUMENTS RELATING TO THIS MOVEMENT eg NVD			
(document type)	(document number)	(office of issue)	(expiry date)

Note: If NVD accompanying this declaration then you may go straight to Question 1.

DESCRIPTION OF CATTLE		
Number	Description (Breed, sex e.g. Wagyu fullblood)	Brands or Earmarks
	<b>TOTAL</b>	If additional descriptions of cattle are required, a separate form should be used

Consigned to (Name of person or business)	
Address	State
	Postcode
Destination address of cattle (if different)	

<b>Q1. Has the owner stated above, owned these cattle since birth?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
<b>Q2. On property stated above, has an on-farm biosecurity plan been implemented?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If YES, which plan (e.g. Farm Biosecurity, LBN, BioCheck)				
<b>Q3a. Have these cattle been tested for the presence of pestivirus antigen?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If tested, were any found to be persistently infected?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
<b>Q3b. Have these cattle been tested for the presence of pestivirus antibody?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If tested, what percentage of the tested cattle were antibody positive?				
<b>Q4. Are these cattle from a tick-free area?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
<b>Q5. Enzootic Bovine Leucosis (EBL) test result for animals being moved:</b>				
	Date of test:			

<b>Q6. Are the cattle from an EBL accredited or certified free herd?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
<b>Q7. Are these cattle from a herd or property with an occurrence of Johne's disease (JD) in any susceptible species within the last five years?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
	DON'T KNOW	<input type="checkbox"/>	J-BAS of	<input type="text"/>
<b>Q8. On the property stated left, have cattle been co-grazed with dairy cattle and/or sheep?</b>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
	DON'T KNOW	<input type="checkbox"/>		
<b>Q9. Source herd has a negative JD test result?</b>	CHECK TEST	<input type="checkbox"/>	SAMPLE TEST	<input type="checkbox"/>
Date of test:				
<b>Q10. Have the cattle been tested for Infectious Bovine Rhinotrachetis (IBR)/(BHV-1)?</b>				
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	IBR NEGATIVE
				<input type="checkbox"/>

Q11. TREATMENTS	Product	Treatment date (within last 6 months)
Drench		
Liver Fluke treatment		
Other treatments (type)		

Q12. Vaccinations for the cattle being moved within the last (6) months (see explanatory notes)			
Clostridial vaccination (e.g. 5 in 1)	YES	<input type="checkbox"/>	Clostridial vaccination (e.g. 7 in 1)
	YES	<input type="checkbox"/>	Clostridial vaccination (Botulism)
Pestivirus vaccination	YES	<input type="checkbox"/>	Bovine ephemeral fever vaccination
Leptospira vaccination	YES	<input type="checkbox"/>	Vibrio vaccination
JD (Silirum) vaccination	YES	<input type="checkbox"/>	

**Q13. Any other relevant health information or vaccinations?**

DECLARATION (see explanatory notes for further information)	
Full name	
Address	State
	Postcode
Phone	Email
I declare that I am the owners 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 *	Date:

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

# CATTLE HEALTH DECLARATION EXPLANATORY NOTES



## OVERVIEW

**The Cattle Health Declaration is a legal document. Please complete accurately before signing.**

Cattle Health Declarations are a way for producers to provide information about the health status of the cattle they are selling. Buyers should ask vendors for a Declaration and use the information provided to determine the health risks associated with the animals offered for sale.

Some states require testing or certification additional to that outlined in this document. e.g. Johne's

disease (JD) in WA. Please check the entry requirements for any interstate movements at: [www.animalhealthaustralia.com.au/what-we-do/endemic-disease/livestock-movements/](http://www.animalhealthaustralia.com.au/what-we-do/endemic-disease/livestock-movements/)

The original is to be attached to the National Vendor Declaration (NVD) form accompanying the cattle, if applicable. A duplicate remains with the vendor; it is recommended the vendor retains a copy of this declaration for seven (7) years.

## QUESTION 3: PESTIVIRUS TESTING

Persistently infected animals can be detected by conducting a pestivirus antigen test. This test only needs to be conducted once in an animal's life. Cattle that test positive in most cases are persistently infected animals. Pestivirus antibody testing may be done to check the pestivirus status of the herd. Contact your veterinarian for assistance in understanding the test results.

## QUESTIONS 5 and 6: ENZOOTIC BOVINE LEUCOSIS (EBL)

All cattle entering Tasmania must meet at least **ONE** of the following criteria:

**Cattle** have been tested for EBL with the ELISA test within 42 days before shipment with negative results and evidence supplied via an attached laboratory report. If samples were pooled, no more than 10 sera or 30 milk samples were combined in each pool. Unweaned calves less than 12-weeks-of-age transported with their dam do not require testing for EBL; OR

**Dairy cattle** from a registered dairy herd must be accredited as Monitored Negative (MN) or better, according to the national guidelines for EBL Control; OR

**Beef or beef-cross breeds** must come from herds in Victoria, South Australia, Western Australia (excluding the cattle tick infested area), New South Wales (excluding the former North Coast Livestock Health and Pest Authority District), or Queensland (excluding the cattle tick infested

area). The herd of origin must have been in existence for at least three (3) years with no evidence of EBL infection in the last three (3) years.

## QUESTIONS 7, 8 and 9: JOHNE'S DISEASE BEEF CATTLE

**Note: JD is a notifiable disease, so it is important to answer these questions.**

Occurrence of JD refers to clinical disease in the herd or on the property. Clinical disease is an infected animal with chronic diarrhoea and weight-loss that does not respond to treatment.

The **Johne's Beef Assurance Score (J-BAS)** is a tool developed for JD risk profiling. Details are available on the Animal Health Australia website under 'JD in cattle'. The J-BAS is an initial guide and purchasers should ask for more information about JD in the origin herd (see JD in Cattle Biosecurity Checklist on the AHA website under 'JD in cattle'). The National Farm Biosecurity Reference Manual - Grazing Livestock Production provides a template to use for the property biosecurity plan. All plans should include the JD in Cattle Biosecurity Plan Checklist.

**Check test** - testing of 50 adult animals in the herd (or all eligible animals in a herd if less than 50 adult animals) biased to increase the probability of detecting infection, tested by ELISA, (pooled) faecal culture or (pooled) HT-J faecal PCR.

**Sample test** - screening of the adult herd or a large representative sample of the adult herd by an approved test (ELISA, (pooled) faecal culture or (pooled) HT-J faecal PCR).

## QUESTION 10: INFECTIOUS BOVINE RHINOTRACHEITIS (IBR)

IBR is a highly contagious, infectious disease that is caused by bovine herpesvirus-1 (BHV-1). Confirmation of exposure to BHV-1 is facilitated by measurement of antibody in serum, plasma or milk.

## QUESTION 11 & 12: TREATMENTS & VACCINATIONS

Provide details on any cattle treatments and vaccinations within the last six (6) months.

Some manufacturers include more than one of the categories listed in the same vaccine, known as a combination vaccine. If you use a combination vaccine, each agent(s), as appropriate, should be detailed.

For vaccinations to be current, you must have followed the manufacturer's recommendation for vaccination. Typically, young animals or first time vaccinated animals need two (2) doses, followed by annual boosters. As variations to this general rule do occur (e.g. Silirum is given once only), you must use the manufacturer's recommendations.

At the date the declaration is made and as a result of the vaccination(s) given, the animals are considered protected from the diseases marked as treated.

## DECLARATION

This section must only be completed by the owner or person responsible for the husbandry of the cattle in the consignment.