NATIONAL CATTLE HEALTH DECLARATION

Version 24/10/2016

OWNER OF CATTLE AN KRAUSE X LO	5. Are the cattle from an EBL accredited of certified	
Owner of cacte	6. Are these cattle from a herd or property with an susceptible species within the last five years?	occurrence of Johne's disease (JD) in any
(Full trading name)  Property/place where the journey commenced (Address)  (Address)		
Property/place where the journey commenced management of Address)	Tes	J-BAS of (optional)
KNAUGES Rd Gum IZLAT NOW WSEC	7. On the property stated above, have cattle been of	o-grazed with dairy cattle and/or sheep?
Property/place where the journey commenced (Address)  KNAW955 Ad Grm (2LAT NSW 2360) (Address continued) (Town/suburb) (State) (Postcode)	Yes No Don't know	
Property Identification Code (PIC) of this property  This MUST be the PIC of the property that the stock is being moved from	8. Source herd has a negative JD test result: Check T	est Sample Test
Details of other statutory documents relating to this movement e.g. NVD	Date of test/	
	9. If dairy cattle, the consignment has a Dairy Assur	ance Score of:
(Deciment number) (Office of issue) (Expiry date)	Part A (herd base score) Part B (calf credits)	Part C (total Dairy Score)
(Document type) (Document manber) (onto a series)	Part A (nerd base score) ammin a creat (	
Note: If NVD accompanying this declaration then you may go straight to question 1	10. Treatments	Date of treatment
Description of cattle	Treatments Product	within last 6 months
Number Description (Breed, sex e.g. Hereford Cross Steers) Brands or Earmarks	Drench	
1 WAGYU BULLS PSKENDO93	Liver fluke treatment	
· · · · · · · · · · · · · · · · · · · ·	Other treatments (type)	
Total	11. Current vaccinations for the cattle being move	
(Name of person or business)  (Address) (Town/suburb) (State) (Postcode)  Destination (if different) of cattle	restivitus vaccinationi	vine ephemeral fever vaccination: Yes ☐ virio vaccination: Yes ☐
1. Has the owner stated above owned these cattle since birth?	DECLARATION (see explanatory notes for further informat	ion
Yes No 🗆	PETEL ILAAUSE SUNNYSIDE 146	
On the property stated above, has an on-farm biosecurity plan been implemented?	VETEL ILOLAUSE	JUN 45102 175
" F "	(Full name) (Full KARUSES Rd	Times a NEW 7761
LPAQA	KAAUSES Rd	[NVEILELL NOW WE
If yes, which plan (e.g. Farm Biosecurity, LPA, Grazing BMP)	(Address continued)	(Town/suburb) (State) (Postcode)
3a. Have these cattle been tested for the presence of pestivirus antigen? Yes No	declare that I am the owner or the person responsible for the h	usbandry of the cattle and that all the information in this
If tested, were any cattle found to be persistently infected?	declare that I am the owner of the persons are seen and understood all the questions that I have answered, that 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,	
3b. Have these cattle been tested for the presence of pestivirus  Yes No  Antibody?	free of disease and fit to travel.	
If tested what percentage of the tested cattle were antibody positive?	*Only the person whose name appears above may sign this dec	Date
4. Enzootic Bovine Leucosis (EBL) test result for animals being moved:	*Only the person whose name appears above may sign this dec	b 120 11 5- at a
	Tel. no. (6.2)	Maure 270 Ciner
Date of test/	Ten no (mayim	