

NATIONAL VENDOR DECLARATION (CATTLE) AND WAYBILL - eDEC



34670066

Printed at: Schulz Livestock - Raven Limousin Pty Ltd
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Purchaser (Receiver) Duplicate C0413

This form cannot be used where eligibility for the EU market is required.

Part A To be completed by the owner or person who is responsible for the husbandry of the cattle.

Owner of cattle Schulz Livestock - Raven Limousin Pty Ltd (FULL TRADING NAME)

Property/place where the journey commenced Coolaroo 784 Naranga Road Field (ADDRESS)

FIELD SA 5265 (TOWNSUBURB) (STATE)

Property Identification Code (PIC) of this property

SA211991

This MUST be the PIC of the property that the stock is being moved from

Description of cattle

Number	Description (BREED, SEX, E.G. HEREFORD CROSS STEERS)	Brands or Earmarks (IF PRESENT OR REQUIRED)
27	Raven sale bulls 16-20months	R - brand on near side rump
4	Raven Stud registered PTIC cows w/calf	R - brand on near side rump
5	Raven Unjoined 7-8mth old stud heifers	Orange tag
36	Total	

Consigned to Raven 2020 Bull & Female Sale (NAME OF PERSON OR BUSINESS) jason@ravenlimousin.com.au

784 Naranga Rd FIELD SA (TOWNSUBURB) (STATE)

Destination (if different) of cattle Field SA 5265 (LOCATION ADDRESS) (STATE)

NLIS devices used on these cattle Number of ear tags 40 Number of rumen devices 0

Details of other statutory documents relating to this movement e.g. health statement
J-BAS 8 Johns Free (WA approved) S418 Bio-security SA 01/12/2022

DOCUMENT TYPE NUMBER OFFICE OF ISSUE EXPIRY DATE

1 Have any of the cattle in this consignment ever in their lives been treated with a hormonal growth promotant (HGP)? (Use a second document for mixed consignments.)
 Yes No +

2 Have the cattle in this consignment ever in their lives been fed feed containing animal fats?
 Yes No (See Explanatory Notes)

3 Has the owner stated above owned these cattle since their birth?
 Yes No If No, how long ago were the cattle obtained or purchased? (If purchased at different times, tick the box corresponding to the time of the most recent purchase.)
 A. Less than 2 months B. 2-6 months C. 6-12 months D. more than 12 months

4 In the past 60 days, have any of these cattle been fed by-product stockfeeds?
 Yes No If Yes, attach a list of the by-product stockfeeds, date when last fed and a copy of an analysts report if available.

5 In the past 6 months have any of these animals been on a property listed on the ERP database or placed under any restrictions because of chemical residues?
 Yes No If Yes, give details: _____

6 Are any of the cattle in this consignment still within a Withholding Period (WHP) or Export Slaughter Interval (ESI) as set by APVMA or SAFE MEAT, following treatment with any veterinary drug or chemical?
 Yes No If Yes, give details: (Record additional details in question 9)
 Dectomax Pour-On 29/01/2020 WHP 32 ESI (if SET) 32

7 In the past 60 days, have any of the cattle in this consignment consumed any material that was still within a withholding period when harvested, collected or first grazed?
 Yes No If Yes, give details: _____

8 In the past 42 days, were any of these cattle:
 a) grazed in a spray risk area; or
 b) fed fodders cut from a spray drift risk area? (See Explanatory Notes for definition of spray drift risk area.)
 Yes No If Yes Date sprayed: _____

9 Additional information: see requirements in Explanatory Notes for completing this document.
JBAS 8 / Booster Vacc 7, Vibrovax, Pestigard & Dectomax given 29/1/20

Declaration
 I Jason Schulz FULL NAME Coolaroo 784 Naranga Road Field FULL ADDRESS
 FIELD SA 5265 jason@ravenlimousin.com.au L P A

Signature: _____ Date: 10/12/2020
 *Only the person whose name appears above may sign this declaration, or make amendments which must be initialed.
 Tel no. 0417863268 Fax no. _____

Part B To be completed by the person in charge of the cattle while they are being moved.
 Completion of this part is optional in SA and VIC.

Movement commenced: 27/02/2020 DAY MONTH YEAR 1400 TIME (hh:mm 24 hr time)
 Vehicle registration number(s)*: _____

I, _____ am the person in charge of the cattle during the movement and declare all the information in Part B is true and correct.

Signature _____ Date _____ / _____ / 20 Tel no. _____

Part C Agents declaration for cattle sold at auction. (Completion of Part C is optional.)

Agents completing Part C should retain the original or a scanned copy of the original declaration or a summary for a minimum of two (2) years, or three (3) years in WA and supply a copy or summary to any buyer on request.

Vendor code / No.'s _____ Agent's code _____

Stock agent company _____

Buyer's name _____ Destination PIC _____

No. of cattle purchased _____ Saleyard arrival time (hh:mm 24 hr) _____ Date _____ / _____ / 20

Agent's signature _____ DAY MONTH YEAR

NATIONAL CATTLE HEALTH DECLARATION

Owner of cattle RAVEN LIMOUSIN PTY LTD
(Full trading name)

Property/place where the journey commenced 784 NARABANGA RD
(Address)

(Address continued) FIELD SA 5265
(Town/suburb) (State) (Postcode)

Property Identification Code (PIC) of this property SA211991
This MUST be the PIC of the property that the stock is being moved from

Details of other statutory documents relating to this movement e.g. NVD

NVD 34670066 MLA 27/12/20
(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. Hereford Cross Steers)	Brands or Earmarks
27	RAVEN SALE BULLS	R - BRAND
13	RAVEN SALE FEMALES	Orange Lot tags
40	Total	

Consigned to RAVEN LIMOUSIN SALE
(Name of person or business)
..... 784 NARABANGA RD FIELD SA 5265
(Address) (Town/suburb) (State) (Postcode)

Destination (if different) of cattle
(Location address)

1. Has the owner stated above owned these cattle since birth?
Yes No

2. On the property stated above, has an on-farm biosecurity plan been implemented?
Yes No

If yes, which plan (e.g. Farm Biosecurity, LPA, Grazing BMP) One Biosecurity SA
3a. Have these cattle been tested for the presence of pestivirus antigen? Yes No
If tested, were any cattle found to be persistently infected? Yes No

3b. Have these cattle been tested for the presence of pestivirus antibody? Yes No
If tested what percentage of the tested cattle were antibody positive?

4. Enzootic Bovine Leucosis (EBL) test result for animals being moved:

Date of test/...../.....

5. Are the cattle from an EBL accredited or certified free herd: Yes No

6. 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?
Yes No Don't know J-BAS of 8 (WA) (optional)

7. On the property stated above, have cattle been co-grazed with dairy cattle and/or sheep?
Yes No Don't know

8. Source herd has a negative JD test result: Check Test Sample Test
Date of test 10/10/19

9. 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)

10. Treatments

Treatments	Product	Date of treatment within last 6 months
Drench	<u>Deconox</u>	<u>29/1/20</u>
Liver fluke treatment		
Other treatments (type)	<u>Ultravac 7/Pestigard/Vibrovax</u>	<u>29/1/20</u>

11. Current vaccinations for the cattle being moved (see explanatory note)
Clostridial vaccination (e.g. 5 in 1): Yes Clostridial Vaccination (Botulism): Yes
Pestivirus vaccination: Yes Bovine ephemeral fever vaccination: Yes
Leptospira vaccination: Yes Vibrio vaccination: Yes
JD (Siltum) vaccination: Yes

Other vaccinations (specify):
12. Any other relevant health information

DECLARATION (see explanatory notes for further information)

I, JASON SCHULTZ (Full name)
..... (Full address)

..... 784 NARABANGA RD FIELD SA 5265
(Address continued) (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 disease and fit to travel.

Signature* JASON SCHULTZ Date 10/12/20
*Only the person whose name appears above may sign this declaration, or make amendments which must be initiated.

Tel. no. (.....) 0817863268 Email j.schultz@ravenlimousin.com.au