

NATIONAL VENDOR DECLARATION (CATTLE) AND WAYBILL - eNVD

C0720 40313638

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 (FULL TRADING NAME)

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

FIELD SA211991 (TOWNSHIP)

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)
34	Raven Black & Polled Limousin & Lim-Flex Bulls - Bull - M	R
34	Total	Use the Attachment Forms for consignments that require more lines to describe the stock. (See Explanatory Notes)

Consigned to Elders Keith Branch (NAME OF PERSON OR BUSINESS) SA (STATE)

194 Stirling Road Keith (ADDRESS) (TOWNSHIP) SA (STATE)

Destination (if different) of cattle 194 Stirling Road (LOCATION ADDRESS) SA (STATE)

Destination PIC (REQ: WA & TAS) 34 Number of rumen devices 34

Details of other statutory documents relating to this movement e.g. health statement 1 / 20

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 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 analyst's report if available.

Print date/time:

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 SATEMEAT, following treatment with any veterinary drug or chemical?
 Yes No If Yes, give details: (Record additional details in question 9)

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: _____ / _____ / 20____

9 Please include any additional information below
 eg: vaccination programs, animal health certification, additional declarations, etc.
Semen tested & Scrotal measured 27/01/2021

Declaration

I Jason Schulz 784 Naranga Road Field FULL ADDRESS SA SA
 FULL NAME FIELD (STATE) LPA

declare that, I am the owner or the person responsible for the husbandry of the cattle and that all the information in Part A of 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, while under my control, the cattle were not fed restricted animal material (including meat and bone meal) in breach of State or Territory legislation.

Signature* [Signature] Date* 25 / 02 / 2021
 *Only the person whose name appears above may sign this declaration, or make amendments which must be initialed.
 Tel no. 0417863268 Fax no. _____

Email: jason@ravenlimousin.com.au

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: 25 / 02 / 2021 05:00 PM (am/pm)
 Vehicle registration number(s)*: _____

Signature _____ am the person in charge of the cattle during the movement and declare all the information in Part B is true and correct.
 Date _____ / _____ / 20____ Tel no. _____

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NATIONAL CATTLE HEALTH DECLARATION

V: 02/05/18

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

SA211991

Attached to accompanying NVD/Waybill No.

40313638

Biosecurity and health information

1. Has the owner stated above owned all the cattle in this consignment since birth? Y N

2. Does the property of origin have a completed on-farm biosecurity plan? Y N

3a. Have these cattle been tested for the presence of pestivirus antigen?
If tested, were any cattle found to be persistently infected? Y N Y N X

3b. Have these cattle been tested for the presence of pestivirus antibody?
If tested what percentage of the tested cattle were antibody positive? Y N X

4. Has the property of origin had an occurrence of clinical Johnes disease (JD) in any species in the past five years? Y N Unsure J-BAS of JBAS 8 (Optional)

5. On the property of origin, have cattle been co-grazed with dairy cattle? Y N Unsure See explanatory note for advice on co-grazing with non-bovine species

6. Has the source herd had a JD test? Y N Pending If so, which test? Check Test Sample Test Date / / Was the result negative? Y N

7. 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)

8. Any other relevant health information Semen tested & Scrotal measured 27/01/2021

Treatments

40313657

Treatment type

Product

Date of treatment within last 6 months

Drench or pour-on

Dectomax

10/12/20

Liver fluke

Other treatments

Current vaccinations for the cattle being moved (see explanatory note)

Clostridial (e.g. 5 in 1): 8/1/21 Y N Botulism: Y N

Leptospirosis (e.g. 7 in 1): 8/1/21 Y N Bovine ephemeral fever: Y N

Pestivirus: 8/1/21 Y N Tick fever: Y N

JD (Siltum): Y N Vibrio: Y X

Other vaccinations (specify): *refer to the attachment

Declaration (see explanatory notes for further information)

I Jason Schulz 784 Naranga Road Field (Full name)

FIELD SA 5285 (Address) (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 signs of disease and fit to travel.

Signature*

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

Date 25 / 02 / 21

Tel. No. () 0417863268

Email jason@ravenlimousin.com.au