

Assessment Form No. \_\_\_\_\_

\*Required fields.

## ASSESSMENT & VENDOR DETAILS

Auction Name: \*  National Lamb  National Sheep  
 Thursday National Sheep  Tas Sheep

Auction Date: \* \_\_\_\_\_

Assessment Date: \* \_\_\_\_\_

Form of Assessment: \*  Individual  Group

No. Head in Lot: \* \_\_\_\_\_

Stock Code: \* \_\_\_\_\_

Sex: \_\_\_\_\_

Sex Composition: \_\_\_\_\_

Bid Types: \*  \$/Head  c/kg Live  c/kg Dressed

### AGENT DETAILS

Assessor AuctionsPlus ID: \* \_\_\_\_\_

Assessor declares financial interest in this lot  Yes  No

Is this a Parallel Assessment?:  Yes  No

If Yes, Parallel Assessor No. \_\_\_\_\_

Parallel Assessor Name \_\_\_\_\_

Agent AuctionsPlus ID: \* \_\_\_\_\_

Is this a joint agency offering?  Yes  No

If Yes, joint agent \_\_\_\_\_

Joint Agent Contact Name: \* \_\_\_\_\_

Joint Agent Contact Details: \* \_\_\_\_\_

### VENDOR DETAILS

PIC(s): \* (where stock are located) \_\_\_\_\_

Vendor AuctionsPlus ID: \* \_\_\_\_\_

Vendor Name: \* \_\_\_\_\_

Address: \* (where stock are located) \_\_\_\_\_

Town: \* \_\_\_\_\_

Postcode: \* \_\_\_\_\_

Accreditations / Certifications:

MSA  If Yes, Cert. No. \_\_\_\_\_

LPA  Organic  If Yes, Cert. No. \_\_\_\_\_

Other accreditations: \_\_\_\_\_

## DELIVERY DETAILS

Earliest Delivery Date: \* \_\_\_\_\_

Latest Delivery Date: \* \_\_\_\_\_

Forward Contract? (tick if yes)

Delivery Points: \* \_\_\_\_\_

Nearest Delivery Town: \* \_\_\_\_\_

Show delivery coordinates in catalogue? (tick if yes)

Trucking Access: \* \_\_\_\_\_

Delivery Comments: \_\_\_\_\_

Weighing Instructions: (If offered c/kg Live) \_\_\_\_\_

### DELIVERY AGENT DETAILS

Contact Person: \* \_\_\_\_\_

Delivery Agent ID: \* \_\_\_\_\_

Mobile: \* \_\_\_\_\_

Work \_\_\_\_\_

After hours \_\_\_\_\_

Fax \_\_\_\_\_

Email: \* \_\_\_\_\_

Agent declares financial interest in this lot  Yes  No

### AGENCY TERMS OF TRADE\*

### SPECIAL CONDITIONS OF SALE

\*Required fields.

## VENDOR SUPPLIED DETAILS

### GRAZING / FEEDING DETAILS

Grazing Conditions:\*

Return same?:\*  Yes  No

If No, return to:\*

### WEANING DETAILS (Required for Suckers & Lambs)

Have Lambs been Weaned? \*  Yes  No

If Yes, weaning date\*:

Weaning details:

### BREEDING DETAILS

Vendor bred: \*  Yes  No

If No, stock history:\*

Bloodlines / full breeding history

### JOINING DETAILS

Not station mated  100% scanned empty

Any access to rams/ stags? \*  Yes  No

If Yes, date of last access:

Details:

Station mated? \*  Continuously joined?  Yes  No

If No, Date ram(s) in: \_\_\_\_\_ Date ram(s) out: \_\_\_\_\_

Ram Breeds:

Any access to rams/stags outside this joining period:\*

Yes  No

If Yes, details:\*

Ram breed(s)

Lot has been pregnancy scanned?:  Yes  No

If Yes, tested by: \*  Vet  Non-vet contractor  Vendor/Station

Certificate/ statement available?  Yes  No

Scanned by: \* (name)

Pregnancy scan date \_\_\_\_\_ % of mob in lamb\*

% multiples (of ewes in lamb) \_\_\_\_\_ % singles (of ewes in lamb)

Term in Months (at time of assessment)\*:

From: \_\_\_\_\_ To: \_\_\_\_\_ % rams

Additional joining details:

### ANIMAL HEALTH & BIOSECURITY

The number of different sources of sheep that have been introduced onto the consignment property in the last 5 years is:\*

0 (closed flock)  1-5  6+  Rams only

All consigned sheep are from a flock that is free of virulent Footrot?\*

Yes  No If No, details: \*

All consigned sheep are from a flock that is free of benign footrot or Scald? \*  Yes  No If No, details:\*

Feet were inspected?  Yes  No If Yes, Number of Head:\*

Details:\*

All Consigned Sheep are from a flock that is free of lice? \*  Yes  No

If No, details:\*

All consigned sheep are from a flock in and ovine brucellosis accreditation scheme: \*  Yes  No

If Yes: Flock accreditation number: \_\_\_\_\_ Expiry date:\*

Within WHP or ESI? \*  Yes  No

If Yes, product:\*

\*Required fields.

**HEALTH TREATMENTS**

	Treatment Type	Date	Product
1			
2			
3			
4			
5			
6			
7			
8			

Russian eligible     Saudi eligible     Slaughter only

National Sheep Health Declaration:\*

Will be provided at delivery     Will be provided at buyer request

Approved JD vaccinates? \*  Yes  No

If yes, vendor has been continuously vaccinating all retained lambs in the consignment flock against JD for \_\_\_\_\_ years. (Vendor bred only)

All consigned Sheep are from a SheepMAP flock: \*  Yes  No

If yes, status: \*  MN1  MN2  MN3  MN1-V  MN2-V  MN3-V

Year Commenced: \* \_\_\_\_\_ Certificate Number: \* \_\_\_\_\_

All consigned sheep are from a flock with a negative test for JD: \*

Yes  No    If yes, which test: \*

\_\_\_\_\_ Date of test: \*

Any other JD Management practices carried out on the property?:

\_\_\_\_\_

\_\_\_\_\_

Any other relevent health information:

\_\_\_\_\_

MOVEMENT RESTRICTIONS  Yes  No

If Yes, details: \*

\_\_\_\_\_

**SHEARING DETAILS**

Mulesed? \*  Yes  No

If Yes, Type (%):    Light    Moderate  
                                  Radical    Unmulesed

If Yes, was pain relief used?  Yes  No

If Yes, details:

\_\_\_\_\_

Shedding breed? \*  Yes  No

If No, any known contact with shedding breeds in their lifetime: \*

Yes  No

Date shorn: \*

Wool cut	Year	kgs
Micron test	Year	micron
Yield	Year	%

**Vendor Comments**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**VENDOR DECLARATION\***

I (full name):

\_\_\_\_\_

Address:

\_\_\_\_\_

declare that; I am the owner and/ or person responsible for the husbandry of the sheep in this consignment and all the information provided to the assessor on this sheep assessment is true and correct.

I also agree to comply with the AuctionsPlus Pty Limited User Agreement & Sale Terms which include giving sole agency to my agent until 3 days post-sale.

\*Signed: \_\_\_\_\_

\*Date: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

*\* Producers are advised to retain appropriate records to support this declaration. Persons making false statements may be liable under fair trading and other relevant state legislations.*

\*Required fields.

## ASSESSED DETAILS

No. / 40ft deck

Lot Identification (Tag/Brands)

### BREEDS\*

	TYPE (PURE, 1ST CROSS, 2ND CROSS, OTHER)	SIRE	DAM	%
1				
2				
3				
4				
5				
6				
7				
8				

### Extended breed description

#### AGE / DROP

Drop(suckers/lambs)\* Earliest Year\* Month\* Day

Latest Year\* Month\* Day

Age (hoggets / ewes / wethers / rams)\*  Months  Years

Low\* High\*

Age breakup

#### DENTITION (No. head)

Nominating dentition?  Yes  No

If Yes, No. head mouthed

Lamb 2T 4T 6T

8T Worn Broken

Detail any lambs with incisors that have erupted but are not in Wear:\*

Detail any worn or broken mouths

#### WOOL / SKIN DETAILS

Crutched?\*  Yes  No

If Yes, type\*  Market  Keyhole  Full

Wool Length (%)\*

0 - 0.25" 0 - 5mm		1.5 - 2" 39 - 51mm	
0.25 - 0.5" 6 - 13mm		2 - 2.5" 52 - 64mm	
0.5 - 1" 14 - 25mm		2.5 - 3" 65 - 76mm	
1 - 1.5" 26 - 38mm		3" + 77mm+	

Majority Length:\*  Inches  Millimetres

Degree of burr:\*  Nil  Very light  Light  Medium  Heavy

Types:\*

Degree of seed:  None observed  Very light  Light

Medium  Heavy

Types:\*

Skin comments:\*

Wool Comments:\*

Number lambs at foot:\*

Lambs at foot sired by:\*

Age of lambs:\*  Months  Weeks

Low High

Sex composition

\*Required fields.

## WEIGHTS (GROUP ASSESSMENT)

Were animals handled?:  Yes  No

Hours off feed: \* \_\_\_\_\_

Weight gain \_\_\_\_\_ kg / day

Delivery adjustment: \* \_\_\_\_\_ %

(Adjust for the curfew before trucking or industry standard for pay weight)

Dressing Percentage: \* \_\_\_\_\_ %

(Apply your dressing % to the weight at assessment - not curfew/adjusted weight)

Weights (Select one)  Live  Dressed

Weight range (kg) (low) \_\_\_\_\_ (high)

Fat score (low) \_\_\_\_\_ (high)

**\*\*AuctionsPlus recommends minimum 20% Sheep Sampled/Weighed on all assessments to maximise accuracy and buyer confidence. Minimum 10% sample is required for your lot to be catalogued\*\***

### WEIGHT & FAT

**NOTE** Dressed: Use Ausmeat weight ranges - 2kg increment (i.e. 18.1-20kg). Live: Double Ausmeat weight ranges - 4kg increment (i.e. 36.1-40kg).

Enter number of head for each range specified

WEIGHT RANGE (kg)	FAT SCORE					TOTALS
	1 (0-5mm)	2 (6-10mm)	3 (11-15mm)	4 (16-20mm)	5 (21mm+)	
-						
-						
-						
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-						

### LAMBS AT FOOT WEIGHTS ( ewes and lambs only )

Number handled \_\_\_\_\_ Low wt (kg) \_\_\_\_\_

High wt (kg) \_\_\_\_\_ Average wt (kg) \_\_\_\_\_

Lambs were bulk weighed  Yes  No

\*Required fields.

## COMMENTS

FRAME		BREEDING QUALITY		WRINKLE SCORE		CARCASE QUALITY GRADE %
A (71cm+)	%	Excellent	%	1 (Plain)	%	ETQ
B (66-70cm)	%	Very good	%	2 (Light)	%	GAQ
C (61-65cm)	%	Good	%	3 (Medium)	%	FAQ
D (56-60cm)	%	Fair	%	4 (Heavy)	%	PLQ
E (-55cm)	%	Plain	%			

Comment on fat score 1 Sheep\*

## ASSESSOR COMMENTS

What best describes this lot?\*

Assessor comments:\*

Assessor Signature\*

Date\*

### REVIEW ASSESSMENT

Form of Reserve: \$/head  c/kg live  c/kg dressed

Reserve: Start:

Bid Increment \$/ Head: \$0.50  \$1  \$5

\$10  \$25  \$50

### PROMOTE YOUR LISTING

#### AuctionsPlus

Promote your listing and your brand to a wider audience on direct Agri-Marketing platforms.

\$30/day (ex GST)

#### The Herd Online

Automatically place your listing, photos and videos on The Herd Online website with a link back to AuctionsPlus

\$30/day (ex GST)

Assessment Form

## Scanning/ Pregnancy Statement

**\*\*Please upload this document if you do not have the original scanning/ pregnancy certificate\*\***

Property Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

PIC No: \_\_\_\_\_ Assessment No: \_\_\_\_\_

Assessor Name: \_\_\_\_\_ Agency: \_\_\_\_\_

Ph: \_\_\_\_\_

Tested by:  Vet  Non-vet contractor  Vendor/Station  Assessor/Agent

IFVet, NCPD ID \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Date Scanned: \_\_\_\_\_

Electronic file with pregnancy status and EID available  Yes  No

### Results

Mob					Total No. Tested
Preg Tested in lamb					
Preg Tested non-detectable					

\*I \_\_\_\_\_ am the owner/manager of the livestock described above and believe this information is accurate to the best of my knowledge.

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

\*I \_\_\_\_\_ scanned the above livestock and believe this information is accurate to the best of my knowledge

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

\*I \_\_\_\_\_ am the assessor of the livestock described above and believe this information is accurate to the best of my knowledge.

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

**\*\*Please state in sale terms if there are any guarantees on live lamb status. Unless stated, or agreed to in writing prior to the sale, there are no guarantees on pregnancy aging or the delivery of a live lamb\*\***

# NATIONAL SHEEP HEALTH DECLARATION

July 2019

## Property Identification Code (PIC) of this property

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

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## Attached to accompanying NVD/Waybill No.

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## SECTION A – Biosecurity Information

- All consigned sheep are from a Livestock Production Assurance (LPA) accredited property?\*  Y  N
- The number of different sources of sheep that have been **introduced** onto the consignment property in the last 5 years is:
 

0 (closed flock) <input type="checkbox"/>	1-5 <input type="checkbox"/>	6+ <input type="checkbox"/>	Rams Only <input type="checkbox"/>
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## SECTION B – Animal Health Information

- All consigned sheep are from a flock that is free of **virulent footrot**?\*  Y  N
- All consigned sheep are from a flock that is free of benign footrot or scald?\*  Y  N   
*(If (N) please provide further information below*

- All consigned sheep are from a flock that is free of lice?\*  Y  N

- All consigned sheep are from a flock in an **ovine brucellosis** accreditation scheme?  Y  N

If Yes, Flock Accreditation No. (except Qld) ..... Expiry Date ..... / ..... / .....

- All consigned sheep are Johne's disease (JD) Approved Vaccinates?\*  Y  N

If Yes, I have been continuously vaccinating all retained lambs in the consignment flock against JD for ..... years. *(Vendor-bred sheep only)*

- All consigned sheep are from a SheepMAP flock?\*  Y  N

If yes, Status ..... Year commenced ..... Certificate Number .....

*\*See explanatory notes on back page for further information*

- All consigned sheep are from a flock with a negative test for JD?\*  Y  N   
If Yes, which test? ..... Date of test ..... / ..... / .....

- Any other JD management practices carried out on the property?  
.....

- Any other relevant health information .....  
.....

## SECTION C – Treatment Information of Consigned Sheep

Treatment type	Product	Date of last treatment
External Parasite Treatment		
Internal Parasite Treatment		
Other treatments		
Vaccination (other than JD)		

## Declaration (see explanatory notes for further information)

I, .....  
(Full name)

.....  
(Address) ..... (Town/suburb) ..... (State) ..... (Postcode)

Tel. No. ( ) ..... Email .....

declare that, I am the owner and/or person responsible for the husbandry of the sheep in this consignment and all the information on this Sheep Health Declaration is true and correct:

**Signature** ..... **Date** ..... / ..... / .....

Producers are advised to retain appropriate records to support this declaration. Persons making false statements may be liable under fair trading and other relevant state legislation.