



ANIMAL HEALTH and ORIGIN DECLARATION

by RESPONSIBLE PERSON¹ for MOVEMENT of LIVESTOCK

I, INITIALS AND SURNAME , I D E N T I T Y N O ,

being the responsible person¹ of the following animals:

cattle	NUMBER	goats	NUMBER	sheep	NUMBER	pigs	NUMBER	other	NUMBER	other	NUMBER	other	NUMBER
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which are ALL the cloven-hoofed livestock in my herd/s on the farm / in the diptank area:

NAME OF FARM / DIPTANK AREA		NUMBER OF FARM
in the local municipal area of		NAME OF LOCAL MUNICIPALITY

hereby, in compliance with the relevant above-mentioned legislation :

1. **declare**, with regard to the above-mentioned animal(s), herd(s) and farm(s), that during the past 28 days :

- 1.1. all animals have either been or were born on the farm or in the diptank area;
- 1.2. no other animals have been added to this/these herd/s;
- 1.3. none of the animals showed any clinical sign suspicious for any controlled disease²; I have checked the mouths of all the animals to be moved up to a maximum of 30 animals
- 1.4. there have been no deaths which may be linked to any controlled disease²;

2. **undertake** to immediately report any suspicious sign of a controlled disease² in any of the above-mentioned animals to a State Veterinarian;

3. **declare**, with regard to the below-listed animal(s) to be moved, that :

- 3.1. I am the owner of the animal(s) or duly authorised by the owner thereof to deal with or dispose of it/them;
- 3.2. the animal(s) has/have been identified as listed below;
- 3.3. I intend to move/send the animal(s), within three days, from the above-mentioned place, to:

NAME OF FARM / DIPTANK AREA / FEEDLOT / ABATTOIR / AUCTION															
in the local municipal area of		NAME OF LOCAL MUNICIPALITY			on	D	D	/	M	M	/	Y	Y	Y	Y
with vehicle number		VEHICLE REGISTRATION NUMBER			and trailer number			TRAILER REGISTRATION NUMBER							
		NAME AND SURNAME OF DRIVER						with contact number						DRIVER CONTACT NUMBER	
by driver															
species					total number										

D D / M M / Y Y Y Y SIGNATURE C O N T A C T N O

Date of declaration _____ Signature and contact number of responsible person _____

This declaration does not replace a veterinary movement permit if required by the Animal Health Act.

1. "Responsible person" means a manager or owner of land or an owner of animals.

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