

Penrith & District Farmers Mart LLP

Farmstock Auctioneers and Valuers

Agricultural Hall | Skirsgill | Penrith | Cumbria | CA11 0DN

e: info@penrithauction.com

t: 01768 864 700

f: 01768 864 099



CALVES & STIRKS

OFFICIAL ENTRY FORM

This Form Must Accompany All Calves to the Market

PLEASE NOTE IT IS AN OFFENCE TO SELL CALVES UNDER SEVEN DAYS OLD

Date of Sale:

Lot Number	Official Ear Tag No.	Breed	Sex S - Steer Bullock H - Heifer B - Bull	Category	Date of Birth	Remarks
	/			☐ Calf ☐ Stirk	/ /	
	/			☐ Calf ☐ Stirk	/ /	
	/			☐ Calf ☐ Stirk	/ /	
	/			☐ Calf ☐ Stirk	/ /	
	/			☐ Calf ☐ Stirk	/ /	
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	/			☐ Calf ☐ Stirk	/ /	
	/			☐ Calf ☐ Stirk	/ /	
	/			☐ Calf ☐ Stirk	/ /	

ARLA producer

☐ YES ☐ NO

FOOD CHAIN INFORMATION TO ACCOMPANY CALVES

- Have withdrawal periods for veterinary medicines and other treatments been met? ☐ YES ☐ NO
- Have any calves in the consignment been treated with any veterinary medicinal products or other treatments in the past 28 days? ☐ YES ☐ NO
If 'Yes', please provide details on reverse.
- Are any calves showing signs of abnormality? ☐ YES ☐ NO
If 'Yes', please provide details on reverse.

DECLARATION OF TB STATUS

4. Are you currently subject to a yearly or 3km surveillance test? ☐ YES ☐ NO

If YES indicate date of pre-movement test:- Date
(For cattle over 41 days of age, if you are subject to the above you must show evidence of a negative test within the last 60 days for each animal).

If NO the date of your last routine herd test? Date

Veterinary Practice responsible for the holding

Name:

Telephone:

I declare that the above information is a true record as of sale date.

Signed

HOLDING No.

NAME

ADDRESS

..... Postcode

TEL/MOBILE No.

Email

Affix current
farm
assurance
sticker
here

FARM ASSURANCE STATUS

complete below or place sticker over the box

FA Number

or complete

Expiry Date

ADDITIONAL FOOD CHAIN INFORMATION

Veterinary medicinal products or other treatments administered to calves in the consignment			
Ear Tag Number			
Name of Medicine or Product			
Date of Administration			
Withdrawal Period			
Reason for Administration			

Details of any calves showing signs of abnormality?			
Ear Tag Number			
Description of Abnormality			

Details of holding or area restrictions for animal health or other reasons?
Slaughterhouse operator and Official Veterinarian must be informed before calves are transported to slaughterhouse.

Details about analysis of samples that have shown that any animal may have been exposed to substances likely to result in residues in meat?
Slaughterhouse operator and Official Veterinarian must be informed before calves are transported to slaughterhouse.

DECLARATION

THIS DECLARATION MUST BE COMPLETED BY THE KEEPER/OWNER OF THE ANIMALS, AFTER CHECKING WITH THE ANIMAL MOVEMENT RECORDS WHICH HE/SHE IS REQUIRED TO MAINTAIN UNDER EXISTING LEGISLATION.

I
(full name of keeper / owner of animals to be moved)

of
address of keeper / owner

Declare:

- I am the person responsible for the care and control of the animals to be moved and have responsibility for maintaining records relating to their movement
- I am the person that has examined the stock and seen no signs of any notifiable diseases
- that the stock comes from a premises which has had no movement of animals onto it in the previous 6 days (other than permitted exceptions)
- that the movement complies with the relevant general licence

Vehicle Registration Number(s)	
Name of Haulage Company: (If Applicable)	
Drivers Name & Address: (If Applicable)	

You have a right to know how we will use the information you have provided us. We may share the information with other members of our group and may make this information available to relevant media groups and other interested parties on request. We and other members of the group may contact you by telephone, e-mail, post or fax to inform you of products or services available. If you do not want to be contacted for marketing purposes or do not wish your information to be made available to any other parties please notify us in writing.