

# LODGE & THOMAS

ESTABLISHED 1892

## CALF ENTRY FORM

THIS FORM **MUST** ACCOMPANY ALL CALVES TO MARKET (please complete a separate white form for all other Cattle)

Truro Livestock Market, Newquay Road, Truro, TR1 1RH

Holding No: 07/219/8000

IT IS THE VENDOR'S LEGAL RESPONSIBILITY TO ENSURE THAT THIS FORM IS COMPLETED IN **FULL** AND THAT **ALL** INFORMATION IS CORRECT, AND THE AUCTIONEERS HAVE **NO** LEGAL RESPONSIBILITY FOR THE CORRECTNESS OF THE INFORMATION SUPPLIED

### VENDOR DETAILS

Name: ..... Holding No: ...../...../.....  
Address: ..... Date of Movement: .....  
..... Tel. No: .....  
Postcode: ..... Mobile No: .....  
Haulier Name: ..... Email: .....  
Vehicle Reg. No: ..... Haulier Assurance No: .....

**\*I am an ARLA Producer and require that these calves are NOT SOLD FOR SLAUGHTER before 8 weeks of age (tick)**

### TB DECLARATION

TB Test Date (Date of Injection) ..... Date of Last Routine Herd Test.....

**PLEASE NOTE: ALL CALVES AGED 42 DAYS OR OVER MUST HAVE BEEN TB TESTED WITHIN 60 DAYS.**

**IT IS ESSENTIAL THAT YOUR VEHICLE/LORRY AND LIVESTOCK CONTAINER/TRAILER IS CLEAN AND IN GOOD REPAIR. IT IS ALSO IMPERATIVE THAT YOUR CLOTHING IS CLEAN AND YOU HAVE CLEAN FOOTWEAR THAT CAN BE DISINFECTED I.E. RUBBER WELLINGTON BOOTS. YOU RISK BEING TURNED AWAY FROM THE MARKET IF YOU DO NOT COMPLY.**

### FOOD CHAIN INFORMATION FOR SLAUGHTER CALVES – DECLARATION

The holding **is not** under movement restriction for Bovine Tuberculosis (TB).

>Cattle on the holding are not under movement restrictions for other animal diseases or public health reasons (excluding a 6-day standstill).

>Withdrawal periods have been observed for all veterinary medicines and other treatments administered to the animals while on this holding and previous holdings.

>To the best of my knowledge the animals are not showing signs of any disease or condition that may affect the safety of meat derived from them.

>No analysis of samples taken from animals on the holding or other samples has shown that the animals in this consignment may have been exposed to any disease or condition that may affect the safety of meat or to substances likely to result in residues in meat.

**If the animals do not fulfil all the above statements, tick this box and provide additional information on an attached document.**

**SIGNED:** ..... **DATE:** .....

### FARM ASSURANCE

Failure to affix FABBL sticker & complete the above information (as appropriate) will result in the animals being classed as non-Farm Assured at the time of sale. It is the responsibility of the vendor to provide true & complete details. In the case of any farm assurance details provided by the vendor being incomplete/incorrect, the purchaser of the lots may at their discretion lodge a claim, in which case the vendor may be liable.

**I declare that the Farm Assurance details I have included on this form at the time of signing are true & correct:**

Signature..... Print Name: .....

**PLEASE STICK  
YOUR FABBL  
STICKER HERE  
OR  
ENTER DETAILS  
BELOW**

**FABBL NO:**

**EXPIRY DATE:**

**01872 272722**

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Chartered Surveyors  
Estate Agents  
Valuers  
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