

# EURO FARM WALES

Document Name: Preventative Maintenance Schedule	Document ID: FRM.14.00
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**Cattle Born before 01/08/1996 MUST NOT be entered**

## FOOD CHAIN INFORMATION FOR CATTLE

<b>Holding Number</b>	<b>Number of Cattle</b>	<b>FQA Sticker</b>  Stick here		
Producers Name & Address <small>Please attach one of your BCMS stickers</small>				<b>FQA No.</b>
				Scheme
				Expire Date
		Details of Vet Surgeon		
Telephone No Fax No		e-mail Please Complete		
<b>Record information about holding restrictions or results of analysis of samples relevant to public health for listed animals on reverse of this form</b>				
<b><u>Welfare declaration</u></b>				
<p>The holding <b><u>is not</u></b> under movement restriction for bovine Tuberculosis (TB)* OR The holding <b><u>is</u></b> under movement restriction for bovine Tuberculosis (TB)* *delete one</p> <p><input type="checkbox"/> The holding is not under movement restrictions for any other animal disease or public health reason</p> <p><input type="checkbox"/> Withdrawal periods have been observed for all veterinary medicines and other treatments administered to the animal(s) while on this holding and previous holdings.</p> <p><input type="checkbox"/> To the best of my knowledge the animals are not suffering from any disease or condition that may affect the safety of meat derived from them.</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> <b>None of the cattle supplied are cloned or are the progeny of cloned cattle.</b></p>				
If the animals do not fulfill all the above statements, tick this box and provide additional information below			<input type="checkbox"/>	
<b>Information about animal(s) believed to be suffering from a disease or condition that might affect the safety of meat derived from it/them.</b>				
Identification of animal(s) – or attached list				
Describe the disease or condition, or diagnosis if a veterinary surgeon has examined the animal(s)				
Record all veterinary medicines and other treatments with a withdrawal period greater than zero administered within the previous 60 days				
Name of medicine				
Date of administration				
Withdrawal period				
<b>Keeper's signature</b>				
<b>Print name</b>				
<b>Date</b>				

