FROME LIVESTOCK AUCTIONEERS LTD

DAIRY CATTLE ENTRY FORM

Frome Market, Standerwick, Frome, BA11 2QB
Tel: 01373 830033 Fax: 01373 831201
email: info@fromelivestock.com

DATE OF SALE: _____ **COMPUTER NO:** _____

NAME: _____

ADDRESS: _____

_____ **POST CODE:** _____

TEL: _____ **MOB:** _____

E-MAIL: _____

HAULIER

VEHICLE REG: _____ **ABM NO** _____

HOLDING NO:

FARM ASSURANCE STICKER HERE PLEASE

TB TEST STATUS 12 24 36 48 MONTHS *(PLEASE CIRCLE)*

60 DAYS PRE-MOVEMENT TB TEST: DATE OF 1ST INJECTION: .....

TREATMENTS & WITHDRAWAL PERIODS

Have any animals on this form been given any **medicine** or **wormer** and are still within the prescribed withdrawal period?

☐ **YES** ☐ **NO**

If **YES** please provide the following accurate detail:

Product: ……..…….....

Date Given: ……..…..... **W/D Period:** …….....days

Date W/D Period Ends: …..…….…….....

I HEREBY DECLARE THAT I HAVE READ THE DECLARATIONS OVERLEAF & HAVE COMPLIED WITH ALL THE STATEMENTS DETAILED ON BOTH SIDES OF THIS FORM:

SIGNED: _____

PLEASE NOTE: There are 2 sides to this entry form both of which MUST be signed. (You are bound by all the statements on the reverse, or 2nd page if downloaded, even if you fail to sign & present it at time of sale).

LOT NO (MARKET USE ONLY)	BREED	CALVED HFR/COW I/C HFR/COW BULLING HFR, CALF	EAR NUMBER	DOB	ADDITIONAL INFORMATION: SIRES, DAMS, YIELDS/LACTATION RECORDS, CELL COUNTS, CALVING DATES, SERVICE/DUE DATES,	RESERVE