	PICKSTOCK TELF Consigned f							7		
НО	LDING NUMBER									
PAYMENT NAME / ADDRESS			ARE YOU FARM ASSURED?			ORGANIC	ORGANIC YES NO			
			YES			If yes please provide				
						Valid Certificate				
			NO			Tr	& Trading Schedule			
CONTACT NUMBER							1	ading Jen		
FAX OR EMAIL ADDRESS										
FILL TA	CAULANDED	DDEED	D 0 I		F		LIMADED	DDEED	D 0 B	
FULL IA	G NUMBER	BREED	D.O.E	3	FULL	IAG N	UMBER	BREED	D.O.B	
DECLARATION										
s the holding ι	under TB restriction	n? Y	/ES		NO					
Cattle on the h excluding a 6 (olding are not undo day standstill)	er any mo	vement r	estric	tions for any	/ anim	ial diseases or	public he	alth reasons	
Withdrawal periods have been observed for any treatments the animal may have received										
Animals are not showing any signs of disease or condition which may affect the safety of the meat.										
Any samples that may have been taken from the animals shown on this consignment have not shown any signs of										
disease or condition that may affect the safety of the meat.										
Please state be	elow what feed the	e animal h	ave eate	n duri	ing the last (60 day	/s.			
Concentrate [Grass/Silage	Compour	nd 🔲 N	lon Uk	K Maize 🔲	Non L	JK Soya 🔲 Ov	vn Feed		
Name of the Su	upplier:			UFAS	Number (if a	applica	able):			
	SIGNATU	RE	PRINT NAME			DATI	DATE			
				1				ı		
TIME OF LOADING	Pm / Am	ARRIVA		P	m / Am		NUMBER / ILER NUM			

If the animals do not fulfil all the above statements please provide additional information on an attached document

File Name	Document Name	Issue No	Issued by	Approved By	Issue Date	Page no
HA 8.75	Food Chain Information Form (Farm)	2	Technical Assistant	Technical Manager	15/02/2018	Page 1 of 1