NATIONAL SHEEP HEALTH STATEMENT

Attached to accompanying NVD/Waybill No. ☐☐☐☐☐☐☐☐

(Version 2 - May 2009)

SECTION 1 – CONSIGNMENT INFORMATION

Owner of sheep.....

Property/place where the journey commenced (full address) .....

..... State .....

Property Identification Code (PIC) of this property: ☐☐☐☐☐☐☐☐

Number	Year born (month, if known)	Description (ie. Breed, sex and type)	Identification (eg. PIC/brand on ear tag if different to above)

Please attach a list if more information is required.

SECTION 2 – OVINE JOHNE'S DISEASE (OJD)

1. This consignment has an ABC score of: (*refer and complete overleaf*)

☐ **Category A** (Area/ flock credits) + ☐ **Category B** (Test credits) + ☐ **Category C** (Vaccine credits) + ☐ **Category D** (Cert. low risk credits) = ☐ **TOTAL ABC SCORE**

2. Were all these consigned sheep born on the above property? Yes ☐ No ☐
   If no, date introduced...../...../..... ABC score at time of introduction: ☐ (if known)

3. Have sheep of a lower ABC score than the consigned sheep been introduced into the flock in the last 2 years? Yes ☐ No ☐
   If yes, what is the lowest ABC score of introductions? ☐

4. How many different sources of sheep have been introduced to the consignor's property in last 2 years? None ☐ 1-5 ☐ 6+ ☐ Rams only ☐

5. Are any of the sheep in this consignment terminal 'T' tag lambs? Yes ☐ No ☐

6. Are these consigned sheep from a SheepMAP flock? Yes ☐ No ☐
   Status..... Expiry date...../...../.....

SECTION 3 – FOOTROT

7. Have the sheep in this consignment been observed for, and any suspect sheep examined for, signs of **FOOTROT** during the past 14 days? Yes ☐ No ☐

8. To the best of your knowledge, are the sheep in this consignment free of **VIRULENT FOOTROT**? Yes ☐ No ☐

9. To the best of your knowledge, are all sheep and goats on the consignor's property free from **VIRULENT FOOTROT**? Yes ☐ No ☐

SECTION 4 - OTHER HEALTH INFORMATION

10. Is the flock accredited under a government administered **OVINE BRUCELLOSIS** accreditation scheme? Yes ☐ No ☐
    Flock Accreditation No:.....
    Expiry Date:...../...../.....

11. Has there been any evidence of sheep **LICE** at, or since, the last shearing? Yes ☐ No ☐
    Date of last shearing (if known): ...../...../.....

12.

Treatments	**Product**	**Date of last treatment**
External Parasite Treatment	.....	...../...../.....
Drench	.....	...../...../.....
Vaccination other than OJD	.....	...../...../.....
Other	.....	...../...../.....

SECTION 5 - DECLARATION

As the owner and /or person responsible for the husbandry of the sheep in this consignment, I declare that the information in this statement is true and correct.

Signed: ..... Date: ...../...../.....

Name (print): .....

Contact phone: .....

Persons making false statements may be liable under fair trading and other relevant state legislation.