



Herd Health Declaration

Herd Prefix:		Name:	
Address:			
Tel:		Sale Date:	
Sale Venue:			

CHeCS HEALTH SCHEME MEMBER *Please tick* YES ☐ NO ☐

If YES, SAC Premium Cattle Health Scheme ☐ HiHealth Herdcare ☐

Other (please list) _____

PLEASE COMPLETE

		Accredited Free	Herd Testing	Vaccination (of sale animals)	Date(s) of Vaccination and Product
BVD	YES	☐	☐	☐	
	NO	☐	☐	☐	
IBR	YES	☐	☐	☐	
	NO	☐	☐	☐	
Lepto	YES	☐	☐	☐	
	NO	☐	☐	☐	
Johne's	Risk Level	☐	Yes	☐	n/a
			No	☐	n/a
TB	Date last tested clear		Testing Interval	1 Year ☐	2 Years ☐
				3 Years ☐	4 Years ☐

Please include any further information you wish included on health on the line below:

Vendor Declaration: I certify that the above information is correct at date of entry. The animal/s has been individually screened for BVD virus (only applicable if not BVD accredited) and I attach a copy of the results. I allow the breed society / auctioneer to verify the details above with my CHeCS provider.

Signed:

Print Name:

Date:

Please submit with entries to: Luings Cattle Society, Pedigree House, 6 Kings Place, Perth PH2 8AD
Email: secretary@luingscattlesociety.co.uk Tel: 01738 448349