

Record of Movement Cattle Tick Carrier (Veterinarian)

To be completed by the person responsible for the cattle tick carrier and emailed to cattletick@dpi.nsw.gov.au no later than 24 hours before importation or given to an authorised officer when the cattle tick carrier crosses the border into the State from the carrier's State or Territory origin. A copy of the completed form must accompany the animals to their destination.

I, pursuant to clause 29 of the Biosecurity Order (Permitted Activities) 2019 provide the following record of movement:
Name of responsible person

a) **Movement Date**

Leaving place of origin	/	/	Returning to place of origin (if applicable)	/	/
-------------------------	---	---	--	---	---

b) Description of carrier (Horse)

Number	Description	Sex

If more animals are being imported, please provide description of the animals as an attachment to this record.

c) Transport details

Vehicle Registration number Float / Trailer Registration

d) Origin of carrier

Property Identification Code (PIC)					
Name of place					
Street address					
Suburb	State		Postcode		
Phone	Email				

e) Destination of carrier

Property Identification Code (PIC)					
Name of place					
Street address					
Suburb	State		Postcode		
Phone	Email				

f) Movement requirements for movement of cattle tick carrier in NSW

- a. The equine was moved directly to the Veterinary Clinic or Hospital for the purpose of the following veterinary procedure and
- b. the equine travelled directly to the Veterinary Clinic or Hospital and stayed entirely within that Veterinary Clinic or Hospital, and
- c. if the vehicle on which the cattle tick carrier is transported to or from the Veterinary Clinic or Hospital transits through an infested area before it enters the State:
 - i. the cattle tick carrier was not off-loaded from the vehicle, and

g) no additional cattle tick carriers were loaded into the vehicle, unless the person has complied with the conditions of importation of the cattle tick carrier set out in Division 2 Subdivision 1 of the Biosecurity Order (Permitted Activities) 2019. **Declaration of the owner**

I hereby declare that the mandatory requirements described in (f) above have been met and all information contained in this record is true and accurate.

<input type="text"/>	<input type="text"/>	/ /
Full name	Signature	Date
<input type="text"/>	<input type="text"/>	
Phone	Email	

h) Declaration of the Veterinarian

I hereby declare that the following mandatory requirements have been met and all information contained in this record is true and correct:

- a. the equine was moved to the Veterinary Clinic or Hospital for the purpose of the veterinary procedure described in f), and,
- b. the equine stayed entirely within the Veterinary Clinic or Hospital, and
- c. the equine was visually free of cattle tick before leaving the Veterinary Clinic or Hospital.

<input type="text"/>	<input type="text"/>	/ /
Full name	Signature	Date