

For Official Use

A	L/K	C	E	O

Signed

Total

Date

Visit Ref:

Seal No.

Collection Notice

1. Completing this form:

- provide the total number of animals to be collected (in various categories) by the Haulage Contractor
- provide each person with a copy of the form.
- complete and send this form to One Health CSC, within 48 hours of completion of collection. Animal and Plant Health Agency, County Hall Spetchley Rd, Worcester, WR5 2NP
- declarations are required from CSFS Member, APHA Official and Haulage Contractor
- for further information, see the CSFS Scheme Booklet (NSP39) or contact: 0345 601 1367

Section 1 – Member’s Details

Registered Keeper

Owner Details (if different from keeper)

Section 2 – Flock Details

Flock CPH No.

Flock Membership No.

Breed

Owner’s Flock description

First CSFS collection for this flock? Yes No

Section 3 – Visit and Sheep Details

A Sheep identified by individual EID from NSP42A, Section 1

Sheep for disposal as SRM will be individually detailed on form NSP42A, Section 1 and 2. Once loaded enter totals below.

Total bolused sheep over 12 months of age

Total bolused sheep under 12 months of age

B Goat Details

All goats will be required to be removed from the holdings as part of CSFS action. Goats will not be bolused and therefore only total numbers to be collected will be detailed in Section 3 of NSP42A. Enter numbers collected below.

Total goats over 12 months

Total goats under 12 months of age

C Additional un-bolused sheep

The CSFS member may have elected to have all or part of a crop of lambs disposed of as SRM without genotype testing. Additionally, the member may present animals which do not possess readable EIDs. Enter details of any animals which do not possess a readable EID and which the CSFS member has agreed to dispose of as SRM on the NSP42A, and below

Un-bolused sheep over 12 months of age

Un-bolused sheep under 12 months of age

D Embryos and Ova

Enter any sheep or goat embryos or ova below.

Embryos

Ova

Section 4 – Declaration**A Compulsory Scrapie Flocks Scheme Member**

I declare that all of the animals in the total in Section 3 (and identified by EID at Section 1 on the NSP42A) of this collection notice were present on the restricted land at the time of the service of NSP47 (A/C or D) movement restriction notice dated or are progeny of those animals born after the notice was served. I have read and understood the terms and conditions (including current compensation and assistance payment(s) rates for this scheme) as published in CSFS Scheme Booklet (NSP39). I claim payment of compensation and replacement allowances, calculated on the basis of the information in Section 3 of this form.

Signature

Name in
BLOCK LETTERS

Date

B APHA Official

I confirm that the animals detailed on this form at Section 3A have been individually identified by means of EID and removed for disposal as Specified Risk Material at an approved disposal facility. I can confirm that I have checked the details in Section 3B, 3C and 3D and they are correct.

Signature

Name in
BLOCK LETTERS

Date

C Haulage Contractor

I confirm receipt of the animals detailed above and have completed form AML1 (SAMU form in Scotland) in respect of this load.

Signature

Name in
BLOCK LETTERS

Date

Haulage
Company Name

Blue copy for NSPAC, Green copy for APHA, Yellow copy for CSFS member, Pink copy for Haulage Contractor

DATA PROTECTION

For information on how we handle personal data please go to www.gov.uk and search Animal and Plant Health Agency Personal Information Charter.

APHA is an Executive Agency of the Department for Environment, Food and Rural Affairs and also works on behalf of the Scottish Government, Welsh Government and Food Standards Agency to safeguard animal and plant health for the benefit of people, the environment and the economy.