



SOUTH PACIFIC MEATS LTD (SPM) BOBBY CALF REGISTRATION/STATUS DECLARATION

Livestock Division
Private Bag 3301, Hamilton

FREEPHONE: 0800 722 422
FREEFAX: 0800 329 225

MAIN SUPPLIER (HERD OWNER)

SPM supplier no: _____ Dairy supply no: _____
 Name: _____ Physical address: _____
 Mailing address: _____ Telephone no: _____
 _____ Fax: _____
 _____ Email: _____
 Tag delivery address: _____ SPM buyer: _____
 _____ Payment percentage: (100%, 50% etc): _____
 Preferred method of receiving payment advices: Mail Fax Email GST: _____
 Please attach verification

Bank acc: Bank Branch Account Suffix
 Please attach deposit slip

Please note: Each property calves are being collected from does require a separate registration form as this is your Animal Declaration for the Bobby calf season

JOINT SUPPLIER

SPM supplier no: _____ Telephone no: _____
 Name: _____ Fax: _____
 Mailing address: _____ Email: _____
 _____ Payment percentage: (100%, 50% etc): _____
 Preferred method of receiving payment advices: Mail Fax Email GST: _____
 Please attach verification

Bank acc: Bank Branch Account Suffix
 Please attach deposit slip

TAG INFORMATION

SPM PREVIOUS SEASON TAGS CAN BE USED, however please discard all 'DAIRY MEAT' ear tags as these are no longer valid

Number of tags required for 2011 Season _____

Calving dates / / To / /

The property from which the bobby calves are uplifted is under TB movement control? **YES/NO**

If yes, I/we agree to use only **YELLOW IDENTIFICATION** tags for these calves.

TB status of my/our herd is: Clear Works Monitored Infected Suspect
 (Tick appropriate status and add index number if stock have "infected" or "clear" (eg C6 or I2 Clear C6)

BOBBY CALF STATUS DECLARATION

I will ensure that any Bobby Calf I send for slaughter is not within the meat withholding period of any animal remedy or treatment:

- Administered to that calf (see note 1 reverse)
- Given to the dam before the birth (see note 2 reverse)
- Given to any cow that has been used to supply milk to the calf (see note 3 reverse)

STATUS OF HERD: Are any of the animals in the herd under residue movement control (see note 4 reverse) **YES/NO**

Have any of the animals in the herd been vaccinated against Johne's disease in their lifetime (see note 5 reverse) **YES/NO**

As part of this agreement I undertake to ensure that all who work with these animals are instructed to the need to comply with these requirements.

If I become aware that any calf has been inadvertently sent for slaughter while not meeting any of these conditions, I shall immediately inform AFFCO New Zealand Ltd.

DECLARATION: I declare that as the supplier of calves intended for human food, this Bobby Calf Status Declaration is true and accurate, and that I have read, understood and agree that I must abide by the requirements set out in both sides of this form. Unless I advise AFFCO New Zealand Ltd of any change prior to 30 November 2011, this declaration will remain valid until that date.

SUPPLIER SIGNATURE _____ DATE _____

Cash for Schools



Nominated school: _____

Address of school: _____

BOBBY CALF STATUS DECLARATION

I/We agree to abide strictly by the "Code of Recommendations and minimum Standards of the Welfare of Bobby Calves" as required by the Ministry of Agriculture. **Calves suitable for slaughter shall be at least 4 days old, milk fed only and not more than 2 months old.**

I/We agree to ensure the calves are fed immediately prior to pickup (within 2 hours).

I/We acknowledge these tags remain the property of AFFCO New Zealand Ltd and will only be used for the identifications of bobby calves for supply to AFFCO New Zealand Ltd.

The information on this declaration must be accurate. If any calf is sent to slaughter while not meeting any of these conditions, I shall immediately inform the slaughter plant.

SPM New Zealand Ltd may retain your calves for rearing.
If you do not wish them to be retained please tick here

NOTE 1: Calves treated directly with any antimicrobial agent (e.g. antibiotic or sulpha drugs) must not be submitted for slaughter. Treatment with an approved electrolytic which is labelled to indicate that there is not withholding period is permitted.

NOTE 2: Where a pregnant cow has been treated with any animal remedy and calves before the meat withholding period of the product has elapsed, then the calf may not be submitted for slaughter until the cow becomes eligible for slaughter.

NOTE 3: Calves may be indirectly exposed to chemical residues if they are fed milk from a treated cow. If calves are exposed to chemical residues via cow's milk, they are not fit for slaughter until after the expiry of the meat withholding period of the cow providing milk.

NOTE 4: Residue Movement Control: When animals at slaughter are found to exceed the permissible limit for any animal remedy, pesticide or other contaminant, MAF will place the risk source farm under movement control. This prevents the movement of animals off the farm without MAF permit. In cases where a farm is placed under movement control after the supplier has supplied a seasonal declaration to the slaughter facility and submit a new seasonal declaration.

NOTE 5: Johne's Vaccination: If you do not know the Johne's disease vaccination of any animal you must circle "YES"

Please sign this form and return in the postage paid envelope enclosed, or fax to us at your earliest convenience.

FREEPHONE: 0800 722 422 OR FREEFAX: 0800 329 225

OFFICE USE ONLY

DATE RECEIVED: _____

GST VERIFICATION: _____

DIRECT CREDIT VERIFICATION: _____

ZONE: _____

DATE TAGS ISSUED: _____