

An LPA NVD is a vital part of your business - make sure it is complete and correct



Who is responsible for completing the LPA NVD?

- Part A:** The sheep or lambs owner or the person responsible for the husbandry of the sheep or lambs.
- Part B:** The livestock carrier.
- Part C:** The livestock agent (optional).

Who keeps the copies?

- Top sheet:** (White) goes with the sheep/lambs to the purchaser.
- Middle sheet:** (Green) goes to the carrier.
- Bottom sheet:** (Pink) stays in the book and should be kept for auditing purposes.

How do I order copies of the LPA NVD

- Go to www.mla.com.au/lqs or
- Phone 1800 683 111

Where do I go for more information?

Go to www.mla.com.au/lqs

IF PIC IS PRE-PRINTED DO NOT CROSS OUT.

List in the Description Table in Part A all PIC numbers (other than the PIC printed) on tags of sheep or lambs in this consignment

Write the name of the person or business (and their address) that the sheep/lambs have been transferred to.

Write the address of where the sheep/lambs will be delivered (if different).

Do not send sheep/lambs to slaughter if they are still within the withholding period or export slaughter interval.

NATIONAL VENDOR DECLARATION (SHEEP AND LAMBS) AND WAYBILL

S0708

Part A To be completed by the owner or person who is responsible for the husbandry of the sheep or lambs.

Owner of sheep or lambs: **Sandra Smith J&S Smith** (FULL TRADING NAME)

Property/place where the journey commenced: **Wyangla** (TOWN/SUBURB) **Benalla** (STATE) **VIC**

Property Identification (PIC) of this property: **3 A B C D 1 2 3**

Description of sheep or lambs

Number	Year born (DROP)	Description (BREED, SEX & TYPE E.G. CROSS-BRED, WETHER, LAMB)	Month of shearing	PICs on Ear Tags/Brands (DIFFERENT TO PIC SHOWN ABOVE)	Earmarks (IF PRESENT OR REQUIRED)
50	2000	Cross-bred lambs	03/03/06		
50 Total					

Consigned to: **John Burrows, Burrows Livestock Agency** (NAME OF PERSON OR BUSINESS) **Benalla** (TOWN/SUBURB) **VIC** (STATE)
123 Roly St (ADDRESS)

Destination (if different) of sheep or lambs: **Benalla Saleyards, Benalla, VIC** (FULL ADDRESS)

Details of other statutory requirements relating to this movement e.g. animal health certificate

DOCUMENT NUMBER: _____ OFFICE OF ISSUE: _____ EXPIRY DATE: _____

1. Have these sheep or lambs been raised consistent with the rules of an independently audited QA program on the property the PIC of which is shown above?
 Yes No If Yes, give details: **Floekcare** (NAME OF PROGRAM) **P 2 1 2 3 4 5 6** (ACCREDITATION OR LICENSE NO.)

2. Have all the sheep or lambs in this consignment been treated with a Scabby Mouth Vaccination either at marking or at least 14 days prior to their presentation for sale?
 Yes No

3. Has the owner stated above owned these sheep or lambs since their birth?
 Yes No If NO, how long ago were the sheep or lambs obtained or purchased?
 If NO, Either list in the Description Table in Part A all PIC numbers (other than the PIC printed above) on tags of sheep in this consignment OR tag all animals with a pink post breeder tag that has your PIC.
 A. Less than 2 months B. 2-6 months C. 6-12 months D. more than 12 months

4. Are any of the sheep or lambs in this consignment still within a Withholding Period (WHP) or Export Slaughter Interval (ESI) following treatment with any veterinary drug or chemical?
 Yes No If Yes, give details: (Record additional details in question 7)
 CHEMICAL PRODUCT: _____ TREATMENT DATE: _____ WHP: _____ ESI (IF SET): _____

5. In the past 60 days, have any of the sheep or lambs in this consignment consumed any material that was still within a withholding period when harvested, collected or first grazed?
 Yes No If Yes, give details:
 CHEMICAL PRODUCT: _____ DATE APPLIED: _____/_____/_____/20 _____ GRAZING WHP: _____ DATE FIRST FED/GRAZED: _____/_____/_____/20 _____ DATE FEEDING/GRAZING CEASED: _____/_____/_____/20 _____

6. Have the sheep or lambs in this consignment ever in their lives been fed feed containing animal fats? (See Explanatory Notes)
 Yes No

7. Please include any additional information below
 eg: vaccination programs, animal health certification, additional declarations, etc.

Declaration

I **Sandra Smith "Wyangla" RMB 1234, Benalla, VIC 3672** (FULL NAME) **Benalla** (TOWN/SUBURB) **VIC** (STATE)
123 Roly St (ADDRESS) **VIC** (STATE)

declare that, I am the owner or the person responsible for the husbandry of the sheep or lambs and that all the information in part A of this document is true and correct. I also declare that I have read and understood all the questions that I have answered, that I have read and understood the explanatory notes, and that, while under my control, the sheep or lambs were not fed restricted animal material (including meat and bone meal) in breach of State or Territory legislation.

Signature* **Sandra Smith** (FULL NAME) Date* **03/03/2008**
*Only the person whose name appears above may sign this declaration, or make amendments which are initialed.

Tel no. **02 9463 9000** Fax no. **02 9463 9111**

Part B To be completed by the person in charge of the sheep or lambs while they are being moved. Completion of this part is optional for WA and VIC.

Movement commenced: _____/_____/_____/20 (am/pm)

Vehicle registration number(s): _____

I **Sandra Smith** (FULL NAME) am the person in charge of the sheep or lambs during the movement and declare all the information in Part B is true and correct.
 Signature _____ Date _____/_____/_____/20 Tel no. _____
*When more than one truck is carrying the sheep or lambs, other vehicle registration numbers are to be recorded.

Part C Agents declaration for sheep or lambs sold at auction. (Completion of Part C is optional.)

Agents completing Part C should retain the original or a scanned copy of the original declaration for a minimum of two (2) years, or three (3) years in WA and supply a copy or summary to any buyer on request.

Vendor code _____ Agent's code _____

Stock agent company _____

Buyer's name _____ Destination PIC _____

No. of sheep or lambs purchased _____ Saleyard arrival time (am/pm) _____

Agent's signature _____ Date _____/_____/_____/20

Use the tools provided in the LPA program to help you answer Part A with confidence.

Once you have correctly completed and signed this form you have met the requirement to have a livestock travel document* and declared that all livestock covered by the LPA NVD have met the LPA program requirements and animal material feeding restrictions.

The carrier should fill in Part B.

The agent may fill in Part C.

The LPA NVD is your guarantee to buyers - get it right.

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