

Please COMPLETE IN FULL before the cattle arrive at the abattoir



**Producer's Name  
& Address**

*Please attach one of your  
BCMS movement stickers*

Organic feed provided by farmer if delivered before 7pm \_\_\_\_\_  
**Organic Scheme Name** \_\_\_\_\_  
 Scheme Number \_\_\_\_\_  
 Inspection Date \_\_\_\_\_  
**Farm Assurance Number** \_\_\_\_\_  
**Agent Name** *if applicable* \_\_\_\_\_  
 Date of last agent visit \_\_\_\_\_  
**Haulier** \_\_\_\_\_  
**Haulier ABM/SSSHA Number** \_\_\_\_\_

**Owners Declaration**  
*I confirm that the cattle listed on this declaration form have travelled directly from the organic farm named above. All cattle listed have spent their entire lives on organic farms, and have been reared to organic & AFS beef assurance scheme standards.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



PLEASE SEND A COPY OF THIS DELIVERY NOTE TO JENNY by fax, email or post

**ABP PERTH ORGANIC  
LIVESTOCK DELIVERY DECLARATION**

Tel: 01738 624242 Fax: 01738 622028

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16			
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	Total		

Time loaded on farm		Date left farm	
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Planned arrival time		Organic feed provided if delivered before 7pm	<i>Please tick</i>
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Time left Farm at		Arrival at abattoir	
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Time unloaded		Batch Number	
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Farm Assurance check		ABM Haulier check	
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