

Section 1: To be completed by keeper moving animals off

Movement Information	
DEPARTURE	DESTINATION
County/Parish/Holding:	County/Parish/Holding: /
Address & Postcode:	Address & Postcode:
Telephone No:	Telephone No:
Movement Date	Number Advised
Description / type	Q.A. Number
Herd/Slap/Temporary mark (if applicable)	Birth CPH (If using a tempo. nark) /
Full Individual Identities (if applicable)	
Haula⁄	formation
Date of loading	me of load
Haulage Company	of r rture
	/ehic railer registration
Haulier Q.A. Number	lame of refreched to the control of
Good Chain In. mat	tic SI) (Optional)
	ate se, tion): YES / NO
ALL pigs have been kept separate (ungulate separation ONLY):	vild animals since 5 weeks old YES / NO
ALL pigs are less than 5 weeks old:	YES / NO
ALL pigs comp **. ** CI statemen. ** ed below: YES / NO • The required withdr **. ** Period **. ** Administer ** 28 days **. To the best of my kno. ** No analysis of samples exposed to any disease ** Amount of the Unique ** Amount of the Unique ** Period ** Amount of the Unique ** Amount	
	above details I have provided are correct
Vance The Pigs (Records, Identification and Movement) (Scotland) Order 2011 Nam Signature	
Nai'	Signature
Section 2 To be completed by keeper receiving animals Scott* Should confirm receipt of this movement with ScotEID (see header for details) English. Keepers should confirm receipt of this movement with eAML2 (www.eaml2.org.uk 0844 335 8400)	
Arrival Date Unloading Date	Number Received
Arrival Time Unloading Time	Number DOA
Receiving Keeper - I declare that the above details I have provided are correct In accordance with the Pigs (Records, Identification and Movement) (Scotland) Order 2011	
Tel. No.	Arrival CPH / /
Name	Signature