

Waybill

Section 22 of the Stock Act 1915

Equine Influenza

Severe penalties apply for knowingly entering false or misleading information on a waybill or when stock are moved without a waybill being completed and given to the drover. If the intended journey involves moving stock from a Cattle Tick Infected Zone or restricted property in a Free or Control Zone you may require a travel permit from an Inspector as well as this Waybill. The stock may also require inspection and/or treatment for cattle tick. Please contact your nearest Inspector as to whether a travel permit is required.

Note that a duplicate copy of this waybill must be held at the property where the travel commenced and the original held at the delivery point for at least 2 years.

1.

Actual owner and postal address

| Full name of actual owner of stock | Postal address of actual owner |
|------------------------------------|--------------------------------|
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2.

Full address of holding, saleyard or place of origin of the stock

Show property name, access road and district

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3.

PIC of registered property of origin of the stock

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4.

Details of person or company taking delivery of the stock

Name of person or company

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Address of person or company

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5.

Full address of destination of the stock. Insert "and return" at the end of address if stock is returning to place of origin of stock.

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6.

Name of person in charge of the stock being travelled

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7.

Date movement commenced

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8.

Particulars of Stock (each animals individual number must be supplied below)

| Horse Name or ID | Description/Sex | Horse & Cattle Brand | Breed |
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9.

Declaration

I of

declare that I am the: actual owner of the stock occupier of the holding of origin of the stock authorised agent of the owner (tick applicable box)

and that

- the particulars provided in this waybill are true and correct;
- the horse/s on the property of origin have had no clinical evidence of equine influenza during the last 14 days;
- the horse/s listed as travelling under this waybill are all free of any clinical signs of equine influenza.

Telephone number
()

Signature Date

Permit Issue

This section is to be completed only when a travel permit has been issued for the movement.

Name of Inspector who issued the travel permit

Address of Inspector who issued the travel permit

Travel permit number Date of Issue

Travel permit number Date of Issue