

Sheep and Goat Movement Document

DEPARTURE LOCATION – All grey fields must be completed

DEPARTURE CPH

ADDRESS OF KEEPER

DEPARTURE DATE Date of Loading (if different)

Time First Animal Loaded Time of Departure

VEHICLE REGISTRATION NAME OF DRIVER

HAULAGE COMPANY PERMIT NUMBER

NUMBER BEING MOVED

SHEEP	GOATS
<input type="text"/>	<input type="text"/>

DESTINATION CPH

I declare that the above details are correct.

KEEPER'S SIGNATURE PRINT NAME

CONTACT PHONE NUMBER

RECEIVING LOCATION – All grey fields must be completed

ARRIVAL DATE Date of Unloading (if different)

NUMBER RECEIVED Time Last Animal Unloaded

SHEEP	GOATS
<input type="text"/>	<input type="text"/>

I declare that the above details are correct / as amended (delete as appropriate)

KEEPER'S SIGNATURE PRINT NAME

CONTACT PHONE NUMBER

- Receiving keepers or exporters located in Scotland should send white copy to SAMU within 3 days of the movement taking place.
- Receiving keepers located out with Scotland should send white copy to their Local Authority within 3 days of the movement taking place.

No. 1234567