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| **Species of animal**  |  |
| **Holding number** |  |
| **Vendor’s name** |  |
| **Address of holding** |  |
| **Telephone number** |  |
| **Email address (where applicable)** |  |
| **Individual animal(s) identification** |  |
| **Medicine administered** |  |
| **Date of administration (including date treatment ended if multiple treatments)** |  |
| **Withdrawal period** |  |
| **Date meat/milk becomes fit for human consumption** |  |
| **Keeper’s signature** |  |
| **Print name** |  |
| **Date** |  |

**Withdrawal Period Declaration**

For farm to farm sales, this template must be completed by the vendor where an animal is sold whilst under a statutory withdrawal period.