



**Please stick a
BCMS Holding
Sticker here**
No Sticker? Note CPH
.../.../....

PREMIUM CATTLE HEALTH SCHEME

Application for Membership of Bovine TB Scheme Only

Please return completed form to: Premium Cattle Health Scheme, SAC Consulting Veterinary Services, Greycrook, St Boswells, Roxburghshire, TD6 0EQ. Please do not send a cheque: you will be invoiced.

For the purposes of the scheme a herd is defined as cattle that are under a unified management system not necessarily on one premise.

Information on this form will be stored and processed on computer. SAC Consulting complies with the standards set by The Data Protection Act 1984.

1 Name of herd owner

Surname Title Initials

2 Full postal address to which we should send correspondence

Postcode
Tel: Fax:
Email:

Breed/s of Cattle

3 Name of herd agent or manager if appropriate

Surname Title Initials

4 Full postal address if different from above

Postcode
Tel: Fax:

5 Address where herd kept

(If this is the same as in 2 or 3, write "as in 2" or "as in 3" as appropriate)

Postcode
Tel: Fax:

Veterinary Practice Details

Full postal address and contact details

Postcode	
Tel:	Fax:

DECLARATION & AUTHORISATION

I wish to apply for membership of the Premium Cattle Health Scheme (PCHS) which is operated by SAC Consulting. I certify that the details given on this form are to the best of my knowledge correct.

For the purpose of the scheme, I agree to all relevant information concerning the health of my herd being disclosed by my veterinary surgeon to PCHS. This information will be treated in confidence.

I have read and undertake to comply with the rules of the scheme.

I understand that PCHS or their agents may inspect my herd, the premises and the herd records in order to verify compliance with scheme rules, and that the evidence of failure to comply may result in the loss of my herd status.

PCHS may vary the rules of the scheme and the level or method of charging, and shall have the right to terminate the scheme. I am entitled to withdraw from the scheme at any time but, if I do, no part of my fees will be refunded.

PCHS uses the British Cattle Movement Service (BCMS) data to produce barcoded labels for sample testing. Your data is secure as we have 'read only' access to your records. If you do not wish us to access your data please let us know. Please note there will be an additional charge for label production where BCMS data is not used.

I authorise PCHS to include details of my stock and my address and telephone number on a database to be used in connection with sale of accredited/accrediting stock. Please note that these details will appear on our website in the public domain. (delete if you do not wish to be included in the database)

Our favoured position is that the PCHS is organised and supervised by the Veterinary Services of SAC Consulting in partnership with the practising veterinary surgeon. Where the veterinary practitioner is unable to provide consultancy there will be an additional charge levied by the PCHS client manager.

BOVINE TUBERCULOSIS SCHEME (bTB)

Additional Information/Declaration for Membership of the Bovine Tuberculosis (bTB) Scheme

I wish to apply for membership of the Bovine Tuberculosis Scheme (bTB) programme please tick here

- I certify the details on this form are, to the best of my knowledge, correct
- For the purposes of this Scheme, I give permission for APHA to supply PCHS with all relevant information concerning bTB testing of my herd for the past 10 years and in the future
- Any such information will be treated as confidential
- I agree to adhere to all CHeCS rules as stipulated in the CHeCS Risk-Level Certification programme for bovine tuberculosis (bTB) document
- I agree to copies of farm status being forwarded to my veterinary surgeon
- I understand that my details and status will be added to the online PCHS membership database (in the public domain)
- You must have a Health Plan in place that includes the biosecurity aspects of the CHeCS bTB program. An annual review of the health plan must be undertaken and a declaration of this, signed off by yourself and your Veterinary Surgeon signed off and submitted.

If you **DO NOT** wish your herd bTB details to be displayed on the online database please tick here

Please let us know how you heard about PCHS/ What prompted you to join?:

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If you are transferring from another Health Scheme please let us know which Scheme so we can get your records:

Name of Scheme

Signature **Date**

Owner/manager (delete as applicable) **Please remember to stick your BCMS holding number on the front page**

Signature **Date**

Veterinary Surgeon