

Herd Bulk Testing



Owner:
Farm Name:
Address:
Supply No:
<i>SVS Laboratories has my permission to test for this bulk milk sample and provide the results to the named vet.</i>
Suppliers Signature:

Vet:		
Practice:		
Phone:	Fax:	Email:
<i>I have received permission from the above supplier for this bulk milk sample to be tested at SVS Laboratories.</i>		
Vet to Sign:		

**Investigation made by Dairy Company
(on bulk milk)**

Dairy Company

Fonterra Westland Tatua
 Synlait Danone Miraka
 Open Country Dairy

Supply Number: _____

Sample Collection Month/s:

January	February	March	April
May	June	July	August
September	October	November	December

BVD PCR
 BVD AB ELISA
 Liver Fluke
 Ostertagia (BSURE)

**Investigation made by Dairy Company
(on individual milk samples)**

From Herd Test

<div style="border: 1px solid black; padding: 5px;"> <p>LIC <input type="checkbox"/></p> <p>Herd Code</p> <p>_____</p> <p>Participant Code</p> <p>_____</p> </div>	<div style="border: 1px solid black; padding: 5px;"> <p>Ambreed <input type="checkbox"/></p> <p>Herd Code</p> <p>_____</p> <p>Participant Code</p> <p>_____</p> </div>	<div style="border: 1px solid black; padding: 5px;"> <p>Owner Collected <input type="checkbox"/></p> <p>(Samples included)</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> </div>
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Next Herd Test Date: / /

Milk from age groups: **2** **3** **4** **older**
(6 per group)

Animal ID if required:

