TAG & TEST SAMPLE RETURN FORM

Application for bovine tissue sample testing

This form must be completed and returned each time you send samples to CIS Laboratory Speir House, Stafford Park 1, Telford TF3 3BD Please use the pre addressed envelope provided.





Gwaredu **BVD**

FARMER DETAILS	VET DETAILS			
Name: Address: Postcode: UK Herd Mark: UK CPH: Tel: Mob: Fax: Email:	Practice Name: Vet Name: Address: Postcode: Tel: Mob: Fax: Email: gwaredubvd@colegsirgar.ac.uk			
Results will be sent by email - please ensure both yours and your vets email addresses are completed above, results will also be emailed to Gwaredu BVD. Results by CIS Herd Secure Login - please contact CIS to obtain a username and password, Tel: 01923 695319. You will also be able to view historic BVD results from CIS.				
Declaration by Keeper				
Signature:	Date:			

SAMPLES should be received at the CIS Laboratory within 3 WEEKS of being taken				
UK HERD MARK	ANIMAL ID (Ear Tag Number)	DATE OF BIRTH	VIAL NUMBERS (Required For Management Tags Only)	SAMPLE DATE

Please ensure that the correct postage is paid, we recommend you use a recorded delivery service.

We cannot be held responsible for any lost samples.

FOR LABORATORY USE:	Lab Ref No:
Date of receipt:	No of samples:
Initials:	Checked:
Reported:	Invoiced:
Vet:	Databased: