



NOORDKAAP LEWENDEHAWE NORTHERN CAPE LIVESTOCK

IDENTIFIKASIE (OORDRAG VAN EIENAARSKAP) DOCUMENT OF IDENTIFICATION (TRANSFER OF OWNERSHIP)

Artikel 6(1) van die Wet op Veediefstal 57 van 1959 – Section 6(1) of the Stock Theft Act 57 of 1959

<p>A Besonderhede van Persoon, wat die vee verkoop, verruil, gee of van die hand sit. Particulars of Person who sells, barterers, gives or in any other manner dispose of the stock</p>	<p>B Besonderhede van Persoon ten behoeve waarvan die vee verkoop, verruil, gegee of van die hand gesit word. Particulars of Person on whose behalf the stock is sold, bartered, given or disposed of.</p>	<p>C Besonderhede van die afslaershuys aan wie die vee gelewer word vir verkoop. Particulars of Auctioneer to whom animals are the stock delivered with, to be sold.</p>
<p>Volle naam en van / Full name and surname _____ ID Nr. / ID No. or Passport Nr. / Passport No.: _____ Sel / Cell _____ Volledige Adres / Full Address.: _____</p>	<p>Volle naam en van / Full name and surname _____ ID _____ Nr. / ID No. or Passport Nr. / Passport No.: _____ Sel / Cell _____ Volledige Adres / Full Address.: _____</p>	<p>Volle naam en van / Full name and surname _____ ID Nr. / ID No. or Passport Nr. / Passport No.: _____ Sel / Cell _____ Volledige Adres / Full Address.: _____</p>

Besonderhede van Vee / Particulars of stock:

Kolom 1 Column 1 Ras of soort Breed or kind	Kolom 2 Column 2 Getal Number	Kolom 3 Column 3 Brand-, oor-, tatoeëmerke (as daar is). Brand mark, ear mark, tattoo mark and other identification mark(s) (if any)	Kolom 4 Column 4 *Indien die vee nie soos vermeld in Kolom 3 is nie of indien sodanige merk nie ingevolge enige wet geregistreer is nie. *If the stock is not marked as stated in Column 3, or if such mark(s) are not registered in terms of any law

LET WEL: Kolom 4 is slegs van toepassing as die betrokke vee nie gemerk hoef te wees ingevolge die bepaling van die Wet op Identifikasie van Diere, Nr 6 van 2002 nie. Ek sertifiseer dat: die vee hierbo omskryf my eiendom is (of) ek behoorlik gevolmag is deur die bogenoemde eienaar soos vermeld in paragraaf B om oor die vee te beskik. (skrap wat nie van toepassing is nie)

PLEASE NOTE: Column 4 shall only be applicable if the Animal Identification Act 6 of 2002 does not require the marking of stock. I certify that: the above-mentioned stock is my property (or) that I am duly authorized by the owner of the above mentioned stock who is mentioned in paragraph B, to deal with or dispose of it. (Scratch out what is not applicable.)

Datum van Transaksie – Date of Transaction _____

Handtekening van persoon wat hierdie dokument uitreik (Kolom A)
Signature of person who issues this document (Column A)

Hierdie dokument moet vir 'n tydperk van een jaar deur die persoon wat die vee verkoop, verruil, gegee of van die hand gesit is, soos vermeld in paragraaf C, in besit gehou word (Ar 6(3) van Wet 57 / 1959
This document must be retained in the possession of the person to whom it has been furnished, as mentioned in paragraph C, for a period of one year (Sect 6(3) of Act 57 / 1959

BTW GEREGISTREED / VAT REGISTERED JA / YES NEE / NO

BTW NR / VAT NR: _____

BANK BESONDERHEDE:

Rekeninghouer / Account Holder: _____
Tak Kode / Branch code: _____
Rekening nr / Account nr: _____

VERWYDERINGSERTIFIKAAT / REMOVAL CERTIFICATE Wet op Veediefstal 57 van 1959 – Section 8(1) of the Stock Theft Act 57 of 1959

A Besonderhede van voertuig waarmee die vee/produkte vervoer of getranspoteer word
Particulars of the vehicle used to transport/convey the stock /produce

B Die Vee/produkte word vervoer, gedryf of getranspoteer:
The Stock/produce is/are driven, conveyed or transported

Reg Nr./ Reg No. _____
Model / Model: _____
Fabrikaat /Make: _____

Vanaf/From (adres) _____
Na/To: (adres) _____

Date uitgereik _____ Ek sertifiseer dat die vee/produkte hierbo omskryf my eiendom is (of) ek die behoorlik volmagtigde agent van die eienaar is (skrap wat nie van toepassing is nie)
Date issued: _____ I hereby certify that I am the owner of above mentioned livestock/produce (or) that I am the duly authorised agent of the owner (scrap if not applicable)

Verwagte datum van aflewering
Expected date of delivery: _____

Handtekening van persoon wat hierdie sertifikaat uitreik (Kolom A)
Signature of person who issues this document (Column A) _____

Geen persoon mag bovermelde vee/produkte waar hy/sy nie die eienaar is nie, op of langs 'n openbare pad dryf (aanjaag), vervoer of transporteer as hy/sy nie in besit is van hierdie sertifikaat nie.
No person may drive, convey or transport any stock/produce of which he/she is not the owner on or along any public road unless he/she has in his /her possession this certificate.

ADDENDUM A: GESONDHEIDSVERKLARING VIR DIERE WAT OP VEILING GAAN / HEALTH ATTESTATION FOR ANIMALS TO BE SOLD DIERE-EIENAAR / LIVESTOCK OWNER:VEE-INFORMASIE / LIVESTOCK INFORMATION WE REQUIRE HEALTH INFO TO THE BEST OF YOUR KNOWLEDGE / ONS VEREIS GESONDHEIDS BESONDERHEDE NA DIE BESTE VAN U KENNIS:

To accept animals at the auction pens, we need info on the health status of the animals and the farm of origin. The Vet at the auction facility needs correct info and that is why this health attestation is important. The info can be of your personal word, from the local state vet or private vet.

Om diere by die veilingshokke te aanvaar, benodig ons inligting oor gesondheidstatus van die diere en die plaas van oorsprong. Die Biosekuriteit's beampte by die veilingsfasiliteit benodig korrekte inligting, en daarom is hierdie gesondheidsverklaring belangrik. Die inligting kan van u persoonlike werk wees, van die plaaslike staatveerarts of privaat veearts.

Ek die eienaar verklaar dat die diere vry is van enige siekte geoom in Artikel 35 van 1984; wet op dieregesondheid / I the owner declare that the animals are free from any disease mentioned in Section 35 of 1984; Animal Health Act

Ons moet weet of enige siektes binne die afgelope 30 dae op die plaas van oorsprong gediagnoseer is. (Verskaf asb datums indien moontlik). We need to know if any disease were diagnosed on the farm of origin in the last 30 days. (Please provide dates if possible).

	SIEKTES / DISEASES	JA / NEE – YES / NO	DATUM / DATE
1	Brucellose (CA) Brucellosis		
2	Tuberkulose (TB) / Tuberculosis		
3	Paratuberkulose / Paratuberculosis		
4	Aansteeklike bees-rinotracheïtis / infectious bovine rhinotracheitis		
5	Leptospirose / Leptospirosis		
6	Bloutong / Blue tongue		
7	Trichomonas-fetus / Trichomonas foetus		
8	Campylobacter fetus / Campylobacter foetus		
9	Ensoötiese bees-leukose / Enzootic bovine leucosis		
10	Hondsdotheid / Rabies		
11	Knopviesiekte / Lumpy disease		
12	Slenkdalkoors / Rift Valley fever		
13	Beesvirale diarree (B.V.D) / Bovine Viral Diarrhoea		
14	Bek- en Klouseer / Footandmouth disease		
15	Ander / Other		

2. Was any samples tested at a lab for:

Brucellosis (CA) Date: _____
 Tuberculosis (TB) Date: _____
 Sheath washes - Trichomonas Date: _____ - Campylobacter Date: _____
 B.V.D. Date: _____
 I.B.R. Date: _____
 Leukosis Date: _____
 Other Date: _____

If available attach the lab results.

Any clinical symptoms observed in the past 2 weeks / Enige kliniese simptome waargeneemdie afgelope 2 weke (spesify/spesifiseer): _____

Since when were animals kept on farm of origin / Van wanneer is die diere op die plaas van oorsprong gehou: _____

When last were any new animals introduced on farm of origin / Wanneer laas is nuwe diere op die plaas van oorsprong bekendgestel? _____

Is the farm currently under quarantine? Is die plaas huidige onder kwarantyn Ja / Yes _____ Nee / No _____ if YES, explain /

Indien JA, verduidelik: _____

VERKLARING / AFFIDAVIT

Hiermee verklaar ek, _____ as die eienaar /

vertegenwoordiger van die eienaar, dat ek die bogenoemde diere ondersoek het en dat die diere klinies gesond was en

klinies vry van enige oordraagbare siekte is. EIENAAR _____ VERTEENWOORDIGER _____

Datum: _____ HANDTEKENING _____

I hereby declare, as the owner / representative of the owner _____, that I have inspected the above-mentioned animals and that the animals are clinically healthy and clinically free from any transmissible disease.

OWNER _____ REPRESENTATIVE _____ Date: _____

SIGNATURE _____

