

Australian Johne's Disease Market Assurance Program for Goats
Agreement between Herd Owner and Approved Veterinarian

This agreement must be renewed annually

Part A

Herd owner's undertaking to approved veterinarian

I,.....

of

being the owner / owner's authorised representative for the purposes of this program* of the goat herd run on the property described below, hereby apply to enrol the herd in the Australian Johne's Disease Market Assurance Program for Goats.

* delete that which is not applicable.

Description of Herd (Stud name, owner (if not listed above), breed etc.)

.....

.....

Property Name & Address:

.....

.....

.....Property Identification Code.....

I also specifically undertake to comply with all conditions of the program and the laws of the State or Territory and that I shall:

1. Retain you as my veterinarian for this program until either of us revoke this agreement.
2. Provide you with the results of all previous examinations or tests for Johne's disease conducted on animals in the herd. I authorise the State Authority to provide you with information about the Johne's disease status of the herd and about previous testing undertaken in the Herd.
3. Assist in the developing and implementing our agreed Herd Management Plan.
4. Present all goats over 12 months of age for testing or inspection as required.
5. Permanently identify and record the identity of all goats selected for testing.

6. Submit any reactors for follow-up examination in a manner which will allow their true status to be determined and within an agreed period of time.
 7. Only sell goats direct with full disclosure to potential purchasers (and to State authorities where movement requirements exist) or direct to slaughter while the status of any reactor remains unresolved or while tracing is being investigated.
 8. Advise you within seven (7) days of my becoming aware of any cases or suspect cases of Johne's disease:
 - in this herd, or
 - in goats originating from this herd that are now located elsewhere, or
 - in another herd from which contributed goats to this herd, or
 - in a neighbouring herd.
 9. Only introduce goats or other eligible species into the herd from other herds with the same or higher status, unless as prescribed under Section 5.5, Introductions.
 10. Only return goats attending shows and/or sales into the herd under pre-agreed conditions.
 11. Maintain records of the movements of any goats into and out of the herd, including the origin and destination of such goats and provide them to you on request.
 12. Maintain a record of all goats in the herd and the examinations and testing for Johne's disease that are carried out in the herd.
 13. Provide authorised people access to the property, herd and all relevant records for the purposes of auditing the program.
 14. Agree to you reporting changes in herd status or suspicion of infection in the herd to the appropriate State authority.
 15. Agree to the publication of the assessed status of my herd (ie MN1, MN2 or MN3).
 16. Agree to surrender to you any Herd Status Certificate if the herd status changes.
 17. In the event of my herd status becoming Infected or being suspected of being infected, I acknowledge that you and/or I have a legal responsibility to report this to the State authority and to provide information to the State authority to facilitate tracing and advice to owners of herds at risk of being infected.
 18. Advise you if the manager of the herd changes or prior to any change in the land on which the herd is run.
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I understand that if I fail to comply with any part of this Agreement, the status of my herd may revert to Non Assessed or Suspect status.

Additional declaration by the authorised representative of the owner:

The owner(s) of this Herd has/have authorised me in my capacity as
to be their representative for the purposes of this program.

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Signature of owner/owner's representative
Veterinarian

Signature of Approved

Date:

Date:

NOTE: For the purposes of the program, a herd includes all goats managed as a separate and discrete unit in terms of physical contact with other groups of eligible species. All goats and eligible species grazed together or at any time, during a 12-month period on the same land or sharing the same facilities are considered to belong to the same herd.



Part B

Approved veterinarian's undertaking to Herd owner

I,

of

a veterinarian approved under the Australian Johne's Disease Market Assurance Program for Goats hereby agree to comply with all conditions of the program and the laws of the State or Territory and specifically undertake that I shall:

1. Advise you on the program and on actions that you will need to undertake to comply with the program.
2. Work with you to develop a Herd Management Plan to reduce the risk of introduction of Johne's disease into the herd.
3. Collect and submit samples required to an approved laboratory.
4. Investigate suspected cases of Johne's disease in the herd or animals or groups of animals that test positive to serological tests by collecting the prescribed specimens from such cattle for laboratory examination.
5. Provide you with a copy of the result of all tests and examinations undertaken for the purposes of this program in your herd.
6. Maintain detailed records of all examinations and testing which support and justify the herd status allocated from time to time.
7. Review your herd records and management relevant to the program every 12 months.
8. Assess the risk to the herd and advise whether to attend individual shows or sales.
9. Determine the status of your herd under the program and issue you with appropriate Herd Status Certificates
10. Advise (State authority) of any change in herd status within 7 days or suspicion of infection in the herd or within the period prescribed by the animal disease laws of the State or Territory.
11. Advise (State authority) of any goat movements onto or off the property should infection be found in this herd.

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Signature of Approved Veterinarian
representative

Date:

.....

Signature of owner / owner's

Date: