



# Health Schemes Application Form



Information on this form will be stored and processed on a computer. SRUC Veterinary Services complies with the standards set by The Data Protection Act 2018 and GDPR.

## Which Scheme(s) do you wish to join:

Scheme (tick as required)	
Premium Cattle Health Scheme (PCHS)	
Bovine Tuberculosis Scheme (bTB)	
Premium Sheep and Goat Health Scheme (PSGHS) <b>Accreditation</b> Scheme	
Premium Sheep and Goat Health Scheme (PSGHS) <b>Monitoring</b> Scheme <i>(allows you to demonstrate you have carried out targeted screening of your flock giving assurance to buyers, at a lower level of assurance than does the Accreditation Scheme)</i>	

## Owner Details & Contact:

Title			
Surname			
Forename(s)			
Correspondence Address			
County			
Postcode			
Mobile		Landline	
Holding Number (CPH)			
Email (reports will be sent to this address)			

## Veterinary Practice:

Practice Name			
Correspondence Address			
Postcode			
Telephone			

SRUC Veterinary Services  
Health Schemes, Greycrook, St Boswells, TD6 0EQ. Email: [pchs1@btconnect.com](mailto:pchs1@btconnect.com)

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# Cattle Details (for PCHS and/or bTB Schemes)



Please stick a BCMS Holding Sticker here

No sticker? Note CPH

.. / . . . / . . . .

Address Cattle kept at:

Same as correspondence	Yes / No (delete as appropriate)
Address	
Postcode	

Breed(s) main 3 only

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Herd Manager

Name	
Address	
Postcode	
Contact Mobile	

Please let us know how you heard about PCHS/bTB Scheme(s) and what prompted you to join?

.....

.....

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

Name of Scheme: ..... Tel: .....

**You must complete the  
Declarations and Signatures  
Page at the end of this form**



# Sheep/Goat Details



Do you wish to be in the **Accreditation** Scheme  OR the **Monitoring** Scheme   
 (please tick below as appropriate)

Schemes to Join (tick as required)	Accreditation	Monitoring
Maedi Visna (MV) <i>for sheep</i>		
Caprine Arthritis Encephalitis (CAE) <i>for goats</i>		
EAE <i>(not available in the Monitoring Scheme)</i>		
Johne's disease <i>for sheep and/or goats</i>		

Address Sheep/Goats kept at:

Same as correspondence	Yes / No (delete as appropriate)
Address	
Address/Postcode	

Are you joining with MV Accredited stock (circle answer)	Yes	No
If so, date 1 <sup>st</sup> accredited animal arrived on farm	date	

**Breed(s)** to become Accredited *please note if you are starting with accredited stock you must complete a Premises Check Form. Purchased Accredited stock must be tested between 6-12 months post purchase to maintain their status.*

Sheep		
Goats		

Do you have any stock that you do not wish to have in the Scheme ie that are to remain non-Accredited? **Yes/No**

	Stock Numbers: MV/CAE Stock to become Accredited				Stock to remain Non Accredited			
	Sheep		Goats		Sheep		Goats	
	Male	Female	Male	Female	Male	Female	Male	Female
12-17m								
18m and over								

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# DECLARATION & AUTHORISATION

I wish to apply for membership of the Premium Health Schemes which is operated by SRUC Veterinary Services. I certify that the details given on this form are to the best of my knowledge correct.

For the purpose of the Scheme(s), I agree to all relevant information concerning the health of my herd/flock being disclosed by my veterinary surgeon. This information will be treated in confidence.

I have read and undertake to comply with the rules of the Scheme(s).

I understand that SRUC Veterinary Services or their agents may inspect my herd/flock, the premises and the herd/flock records in order to verify compliance with Scheme rules, and that the evidence of failure to comply may result in the loss of my status.

Premium Health Schemes may vary the rules of the Scheme(s) and the level or method of charging, and shall have the right to terminate the Scheme. I am entitled to withdraw from the Scheme(s) at any time but, if I do, no part of my fees will be refunded.

The Premium Cattle Health Scheme 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 agree to allow us to access your data please tick here:**

*[Please note there will be an additional charge for label production where BCMS data cannot be accessed]*

Premium Health Schemes has web based information on herd/flock disease statuses in the public domain for use in connection with sale of accredited/accrediting stock.

**If you wish your contact details and stock data to be included on the web (SRUC and Others) please tick here:**

Our favoured position is that the Premium Health Scheme membership is organised and supervised by the SRUC Veterinary Services in partnership with the practising veterinary surgeon.

**FOR 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 would like your bTB details to be displayed on the online database**

I wish to apply for the Scheme(s) as detailed in this form. I certify that the details given on this form are to the best of my knowledge correct.

I have read and undertake to comply with the rules of the Scheme(s).

Name (Print): .....

Signature: ..... Date: .....

*Please Return the Completed form to the address below:*

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- If an error is made in the payment of your Direct Debit, by SRUC or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society
  - If you receive a refund you are not entitled to, you must pay it back when SRUC asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



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