



MINISTRY OF AGRICULTURE & FISHERIES

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VETERINARY SERVICES DIVISION

FORM 1- FEEDING SCHEDULE AND NUTRITION INSTRUCTIONS IN QUARANTINE

Name of Client	
Estimated start date of quarantine	
No. and description of animals	
Name and contact details of Private veterinarian	

TYPE AND QUANTITY OF FEED TO BE DELIVERED AT THE NATIONAL QUARANTINE STATION

Description Of Feed Including Manufacturer Details And Batch No.s Where Necessary	Quantity

DAILY FEEDING SCHEDULE

Time Of Day / frequency	Quantity	Type Of Feed