## *Certificate number (office use only):*

Form LB1: Health Certificate for Movement of Camelids into Western Australia

*Biosecurity and Agriculture Management Act 2007* (BAM Act) and Regulations 2013

A completed LB1 Form (**Parts 1 and 2)** must accompany the stock to be moved into WA.WA’s import requirements are contained in **Part 3**, which must be read prior to completing **Parts 1 and 2**.

* **The exporting owner/manager must complete the declarations for Part 1(a)–1(c)** **and Part 2(a)–2(d)**.
* **The exporting owner’s/manager’s veterinarian/authorised government inspector must complete the declarations at Part 2(e).**
* **The importing owner/manager must complete the declarations at Part 2(f).**

**A copy of the form must be provided to the relevant Entry Inspection Point** (see **Part 3, Table 1**) **at least three working days before the estimated time of arrival.** Failure to do so may result in a delay in import clearance.   
  
Please type directly into the document to complete and sign or print and complete by hand in block letters.

# Part 1: Consignment, entry and destination details

| Part 1(a) Camelid consignment details | | | | |
| --- | --- | --- | --- | --- |
| **Breed** | **Number** | **Sex** | **Age** (y/m) | **Identification:** brand, earmark or approved identifier |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

| Part 1(b) Entry into WA details | | |
| --- | --- | --- |
| Entry Inspection Point | Check (x) applicable option | Kalgoorlie Kununurra Perth Airport  Quarantine facility other – specify: |
| Expected arrival | Date (d/m/y) |  |
| Time (am/pm) |  |
| Carrier/company/airline |  |
| Flight number (if by air) |  |

| Part 1(b) Entry into WA details | | |
| --- | --- | --- |
| Transport company | Name |  |
| Phone |  |
| Email |  |
| Mobile of transport vehicle |  |
| NVD/waybill | Number |  |

Note: A **consignment** is one or more animals from a property moving to a destination property. Camelids may stay at a transit location in WA for a short time as part of movement to the final destination.

| Part 1(c) Exporting property and destination details | | |
| --- | --- | --- |
| **Exporting property** | Animals moved for the purpose of *(check (x) all applicable options)* | breeding companion export overseas production sale show/exhibition  slaughter other – specify: |
| Stock origin *(check (x) one option)* | homebred not homebred  mixed consignment |
| Property identification code (PIC) |  |
| Property of consignment address (road address, locality, postcode) |  |
| Business name |  |
| Postal address |  |
| Exporting owner/ manager name |  |
| Phone |  |
| Email |  |
| **Transit location in WA**  **(if applicable)** | PIC |  |
| **Livestock destination in WA** | PIC |  |
| Destination property address (road address, locality, postcode) |  |
| Business name |  |
| Postal address |  |
| Owner/manager name |  |
| Phone |  |
| Email |  |

# Part 2: Camelid health and property biosecurity declarations

## 2(a) Cattle tick

| Part 2(a) Exporting owner/manager declaration – cattle tick | | | | Check (x) relevant option |
| --- | --- | --- | --- | --- |
| **Movement details** | * The camelids are being moved from a Cattle Tick Free Area into WA. | | |  |
| * The camelids are being moved from a Cattle Tick Infested Area into the Cattle Tick Free Area of WA. | | |  |
| * The camelids are being moved from a Cattle Tick Infested Area into a Cattle Tick Infested Area of WA. | | |  |
| * The camelids are being moved into WA from an area under movement restrictions for chemical-resistant cattle tick. | | |  |
| **Declaration** | I, being the exporting owner/manager identified in **Part 1**, declare to the best of my knowledge that the camelids identified in **Part 1(a)** meet cattle tick requirements as detailed in **Part 3(a).** | | | |
| **Signature** |  | **Date** (d/m/y) |  | |

## 2(b) Johne’s disease (JD)

| Part 2(b) Exporting owner/manager declaration – Johne’s disease (JD) | | | | | | | | Check (x) relevant option |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Identify whether Declaration 1 or 2 below applies to your consignment, then check (x) the corresponding option(s) and sign the corresponding declaration.*** | | | | | | | | |
| Declaration 1: I, being the exporting owner/manager identified in **Part 1**, declare to the best of my knowledge that the camelids identified in **Part 1(a)** meet the JD conditions for: | | | * **Camelids imported direct to abattoir:** Camelids are being moved directly from the Entry Inspection Point to a DPIRD-approved yard or abattoir lairage– refer to **Part 3(b)(ii)**. | | | | |  |
| * **Short stays:** Camelids that leave WA and return to WA within 49 days are eligible for re-entry in relation to JD – refer to ***Part 3(b)(iii)***. An **LB7 form** is also required. | | | | |  |
| **Signature** | |  | | | **Date** (d/m/y) | |  | |
| **OR** ****Declaration 2:**** **I, being the exporting owner/manager identified in Part 1, declare to the best of my knowledge that the camelids identified in Part 1(a) meet the JD import requirements Part 3(b)(i) including that:** | | | * The camelids were born and resided only on property(ies) with no suspected or confirmed JD infection in livestock, during the five years prior to movement off the property(ies), AND | | | | |  |
| * The camelids have not been in contact with livestock suspected or known to be infected with JD. | | | | |  |
| **Signature** |  | | | **Date** (d/m/y) | |  | | |

## 2(c) Liver fluke

| Part 2(c) Exporting owner/manager declaration – liver fluke | | | | Check (x) relevant option |
| --- | --- | --- | --- | --- |
| I, being the exporting owner/manager identified in **Part 1**, declare to the best of my knowledge that the camelids identified in **Part 1(a)** meet liver fluke requirements for entry into WA as detailed in **Part 3(c)(i)**  **OR** | | | |  |
| **The camelids are exempt for one of the following reasons:** | | | | |
| **Camelids moving into the Pastoral Area of WA**   * For camelids being moved to the Pastoral Area under **Part 3(c)(ii):** * the area on which the camelids identified in **Part 1** have been held, since being treated and tested by a registered veterinarian or authorised inspector for liver fluke 21 to 35 days before the intended date of departure, is considered unsuitable habitat for the liver fluke intermediate host snail by the registered veterinarian/authorised inspector, and * during this period, camelids have only had access to feed from this, or other such area, or to pelleted feed. | | | |  |
| **Slaughter or export**   * Camelids from any area are exempt from all testing and treatment if they are moved directly from the Entry Inspection Point to: | | * an abattoir lairage outside the Liver Fluke Restricted Area for slaughter within 48 hours – refer to **Part 3(c)(iii).** | |  |
| * ports outside the Liver Fluke Restricted Area for immediate loading for export within 48 hours – refer to **Part 3(c)(iv)**. | |  |
| **Consignment from the Liver Fluke Test Exempt Area**   * Camelids born and grazed solely in the Liver Fluke Test Exempt Area are exempt from all testing or treatment if they are moved directly from the Entry Inspection Point to a DPIRD-approved holding yards or an abattoir outside the Liver Fluke Restricted Area for export or slaughter within 40 days **OR** inside the Liver Fluke Restricted Area for export or slaughter within 48 hours – refer to **Part 3(c)(v).** An **LB5 Form** is required. | | | |  |
| * Camelids born and grazed solely in the Liver Fluke Test Exempt Area being consigned to the Kimberley Region of WA are exempt from all pre-entry, entry and post-entry testing and treatment – refer to **Part 3(c)(vi).** An **LB5 Form** is required. | | | |  |
| * Camelids born and grazed solely in the Liver Fluke Test Exempt Area consigned to areas other than the Kimberley are exempt from a pre-entry test and post-entry testing and treatment but an entry treatment will be given at the Entry Inspection Point – refer to **Part 3(c)(vii).** An **LB5 Form** is required. | | | |  |
| **Short stays**   * Camelids that leave and return to WA within 49 days (check (x) one of the options if applicable): | | * **Camelids of WA origin that have departed WA for a period of 10 days or less** are exempt from all pre-entry testing and entry treatment for liver fluke – refer to **Part 3(c)(viii).** Post-entry testing and treatment may be required as shown in **Part 3**. An **LB10 Form** is required. | |  |
| * **Camelids of WA origin that have departed WA for a period of 11 to 49 days** are exempt from pre-entry testing but an entry treatment will be given at the Entry Inspection Point – refer to **Part 3(c)(ix**). Post-entry testing and treatment may be required as shown in the **Part 3**. An **LB6 Form** is required. | |  |
| **Signature** |  | | **Date** (d/m/y) |  |

## 2(d) Exporting owner/manager overall declaration

| Part 2(d) Exporting owner/manager declaration – overall declaration | | | |
| --- | --- | --- | --- |
| I, being the exporting owner/manager of the camelids identified in **Part 1(a),** declare to the best of my knowledge that:   * The information provided in **Part 1 and Part 2** is correct and accurate. * The camelids identified in **Part 1(a)** and all the relevant properties on which the camelids have resided meet all of the import requirements for **cattle tick**, **Johne’s disease** and **liver fluke** for entry into WA as detailed in **Part 3**. * All of the relevant documentation, including a copy of **all** **laboratory results**, to meet the import conditions has been provided for all the properties on which the camelids identified in **Part 1(a)** have resided. * The camelids are free from seeds and burrs of weeds which are declared pests under the BAM Act. Since the inspection by the registered veterinarian or authorised government inspector, as detailed in ***Part 2(e*)**, the camelids have only been held in an area free of these weeds. * Where the camelids identified in ***Part 1(a)*** do not meet all applicable conditions of entry into WA as detailed in ***Part 3*,** an Import Permit has been obtained and a copy accompanies this Health Certificate. | | | |
| **Signature** |  | **Date** (d/m/y) |  |

## 2(e) Registered veterinarian or authorised government inspector declaration

| Part 2(e) Registered veterinarian or authorised government inspector declaration – camelid inspection, tests and treatments | | | | |
| --- | --- | --- | --- | --- |
| **Declaration:**  I, being the registered veterinarian/authorised government inspector of the camelids described in **Part 1(a),** declare to the best of my knowledge that: | * After due enquiry, the camelids, and all the properties on which the camelids have resided, as identified in **Part 1**, meet all of the import requirements detailed in **Part 3**. | | | |
| * The particulars of the declarations made in **Parts 1 and 2** by the exporting owner/manager are correct. | | | |
| * I examined the camelids identified in **Part 1(a)** within 14 days prior to the intended date of departure and found them to be:   + in good health and identifiable as listed in ***Part 1(a)***   + free from seeds and burrs of weeds which are declared pests under the BAM Act. | | | |
| **Tests or inspections** **as required by Part 3 were conducted on the following dates:** | | | | |
|  | **Cattle tick inspection** | | **Liver fluke test** | |
| **Date** (d/m/y) |  | |  | |
| **Test details** (a copy of all test results must be attached to this form) |  | | | |
| **I treated or supervised treatment of the camelids as required by *Part 3:*** | | | | |
|  | **Cattle tick treatment** | | **Liver fluke treatment** | |
| **Date** (d/m/y) |  | |  | |
| **Details of treatments administered** |  | | | |
| **Registered veterinarian/authorised government inspector details** | | | | |
| **Name** |  | | | |
| **Business/ organisation name** |  | | | |
| **Address** |  | | | |
| **Email** |  | **Phone** | |  |
| **Veterinarian registration number** |  | **Authorised government inspector designation** | |  |
| **Signature** |  | **Date** (d/m/y) | |  |

## 2(f) Importing owner/manager: general requirements for imported camelids requiring post-entry treatment and testing for liver fluke

The importing owner/manager may complete **Part 2(f)** before submission of **Part 2(e)** (the cattle tick and/or liver fluke import testing and/or inspection), provided the importing owner/manager has confirmed the exporting owner/manager will comply with the import conditions.

The general requirements are:

* Camelids must be treated for liver fluke by a registered veterinarian or authorised government inspector 21 to 35 days post-entry into WA, and
* Camelids must be tested for liver fluke by a registered veterinarian or approved government inspector 90 to 100 days post-entry into WA.

The livestock transporter will receive a copy of a Direction notice issued to the WA importing producer (***LB14 Direction to Move Stock for Treatment and Testing***) to move camelids at the Entry Inspection Point to the destination property for liver fluke treatment and testing. The livestock transporter must provide the LB14 Direction notice to the owner/manager responsible for the camelids at the destination property.

Imported camelids must meet the post-entry requirements detailed in **Part 3**, **Table 2** Liver fluke requirements.

| Part 2(f) Importing owner/manager declaration | | | Check (x) each option |
| --- | --- | --- | --- |
| **DecIaration:** I, being the importing owner/ manager of the camelids identified in **Part 1(a)**, declare that: | * I have confirmed with the exporting owner/manager that the camelids identified in **Part 1(a)** will meet all of the import requirements for entry into WA. | |  |
| * The camelids identified in **Part 1(a)** will be treated and tested for liver fluke in accordance with the conditions outlined within the import conditions and detailed within the LB14 Direction notice issued upon release from the Entry Inspection Point. | |  |
| * If the imported camelids are to be moved from the property, or there is a change of ownership from that listed on the LB14 Direction notice, I will contact the DPIRD District Office via the email address on the LB14 Direction notice before the camelids are moved. | |  |
| * I acknowledge that non-compliance with post-entry conditions may result in ineligibility to import in the future. | |  |
| **Signature** |  | **Date** (d/m/y) |  |

**Warning: Compliance with conditions of movement of stock into Western Australia is not a guarantee animals are free of pests or disease. Imported stock, or stock in contact with imported stock, may be subject to further testing, treatment, quarantine and/or destruction and must be made available, upon request, to the Department of Primary Industries and Regional Development.**

**Penalties may apply for non-compliance with import requirements including the post-entry requirements detailed within a LB14 Direction notice issued by an inspector under the BAM Act. Camelid owners/managers may be** ineligible to import livestock in the future while there is outstanding non-compliance with post-entry requirements.

**At any time after entering WA, imported stock, and stock with which they may have had contact, and land on which they may have run, may be deemed as being suspected of being diseased if any stock or land with which the imported stock may have had contact prior to entry is found to be diseased.**