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| --- |
| **Completing this submission form means that you are giving Crowshall Veterinary Services LLP permission to hold your personal data. Please refer to the Crowshall Veterinary Services LLP Data Protection Policy Statement for more information. This is on display on our noticeboard or available at** [**www.crowshall.co.uk**](http://www.crowshall.co.uk) |

**LION CODE PACKING CENTRE**

**Salmonella Sample Submission Form**

 (NB- shaded boxes below **must** be filled in for UKAS/Lion Code Compliance)

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name  |  | Packing Centre Name/PC Number |  |
| Company Address |  | Packing Centre AddressName of person taking the sample | …………………………………….. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Sample Type****(e.g 20 eggs, Grader Swabs, number ………..)** | **Producer Name/****Farm Name** | **Producer Establishment Number** | **Sampling date** |
|  |  |  \_/UK/ \_\_\_\_\_ |  / / |
|  |  |  \_/UK/ \_\_\_\_\_ |  / / |
|  |  |  \_/UK/ \_\_\_\_\_ |  / / |
|  |  |  \_/UK/ \_\_\_\_\_ |  / / |
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**COMMENTS or ADDITIONAL REQUEST:**