Code of Practice for the Operation of

Breeding and Rearing Businesses (2014)

Complete animal record

|  |  |
| --- | --- |
| Business name |  |
| Proprietor name |  |
| Domestic Animal Business number (issued by Council) |  |
| Business address |  |
| Business operations manager name |  |

## Animal details: dog / cat (circle)

Location at facility (pen number and location):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Microchip number |  |
| Gender |  | Distinguishing features |  |
| Number of litter mates |  | Coat colour |  |
| Date of birth |  | Breed |  |

# Parentage

|  |  |  |  |
| --- | --- | --- | --- |
| Female parent details | | Male parent details | |
| Name |  | Name |  |
| Date of birth |  | Date of birth |  |
| Microchip number |  | Microchip number |  |
| Breed |  | Breed |  |
| Coat colour |  | Coat colour |  |

If sire/dam are no longer owned by the business, current owner’s details should be recorded below (where known)

# Birth history

|  |  |  |  |
| --- | --- | --- | --- |
| Date of birth |  | Female’s litter number |  |
| Number of females in litter |  | Number of males in litter |  |
| Number of live births in litter |  | Number of stillborns in litter |  |

Describe any birth complications

Describe any physical deformities or health issues observed and treated for in the puppy/kitten in the 48 hours immediately after birth

Other comments

# Disposal record

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Microchip number |  |
| Gender |  | Breed |  |
| Date of disposal |  | Coat colour |  |

# Disposal method and details

(Record whether animal was sold as pet/for breeding /retired/euthanased, etc.)

# New owner details

|  |  |
| --- | --- |
| Name |  |
| Residential address where animal will live |  |
| Contact phone number |  |
| Municipal council |  |
| Council notified by breeder | Yes / No |
| Microchip transfer form signed | Yes / No |
| Microchip transfer form lodged | Yes / No |
| Guarantee signed and given to new owner | Yes / No |

Note: Copy of microchip transfer form and signedguarantee should be attached to this record

# Euthanasia record

|  |  |
| --- | --- |
| Date of euthanasia |  |
| Name of person performing euthanasia |  |
| Contact phone number and address for person performing euthanasia | Address:  Phone number: |
| Reason for euthanasia |  |

# Return record

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Gender |  |
| Microchip number |  | Return date |  |
| Breed |  | Coat colour |  |

# Return reason

Record reason for return

# Return checklist

|  |  |
| --- | --- |
| Owner return form completed | Yes / No |
| Microchip transfer form signed | Yes / No  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Microchip transfer form lodged | Yes / No  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Council records updated by breeder | Yes / No  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Note: Copy of microchip transfer form should be attached to this record

# Vaccination and worming history (dogs)

(Must be accompanied by a copy of the veterinary issued vaccination record)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Canine Distemper | Infectious Canine Hepatitis | Canine Parvovirus | Canine Cough (parainfluenza (Type II) and Bordetella bronchiseptica) | Intestinal worms | Heartworm | Fleas | Ticks | Mites |
| Date given |  |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |  |
| Date given |  |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |  |
| Date given |  |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |  |
| Date given |  |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |  |

Note: Copy and paste table onto new page for older/breeding stock

# Vaccination and worming history (cats)

(Must be accompanied by a copy of the vaccination record)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Infectious  Feline  Enteritis | Feline Respiratory Disease (Feline Calicivirus and Feline herpes virus) | Feline Immunodeficiency Virus  (FIV) or Feline AIDS  (kittens only) | Tested Free for FIV | Intestinal  worms | Fleas | Ticks | Mites |
| Date given |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |
| Date given |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |
| Date given |  |  |  |  |  |  |  |  |
| Name (print) |  |  |  |  |  |  |  |  |
| Signature |  |  |  |  |  |  |  |  |

Note: Copy and paste table onto new page for older/breeding stock

# General animal health record

|  |  |  |  |
| --- | --- | --- | --- |
| Date & Time | Description of Illness | Treatment | Name, position and signature of treating person |
| Example  7.2.2012  7.50am | Small wound on back leg — above hock  Has been bleeding, but had begun to scab over | Washed with saline  Antiseptic ointment applied  Check in 4 hours  Manager notified | Frank Red  Animal attendant  (signature) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Note: Copy and paste table onto new page for older/breeding stock

# Female mating/breeding history

|  |  |
| --- | --- |
| Microchip number |  |
| Date of birth |  |
| List dates of breeding clearance certificates and attach copy to record |  |
| Name, address and contact details of issuing veterinary practitioner (if not stated on certificate) |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last breeding clearance certificate issue date | Mating date  (List each day individually) | Male | | | Pregnancy confirmed date | Expected due date | Birth date | # Live births | | # Stillborn | | Litter number |
| Name | Microchip # | Breed | Female | Male | Female | Male |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

Note: All breeding clearance certificates must be attached to this record

# Litter 1 record (live births only)

Birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Female parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Offspring number** | **Gender** | **Microchip number** | **Breed** | **Coat colour and distinguishing features** | **Sold/retained** | **General comments on health  of animal** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |

Note: Add lines for larger litters

Comment on progress of birth and/or birth complications

# Litter 2 record (live births only):

Birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Female parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Male parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Offspring number** | **Gender** | **Microchip number** | **Breed** | **Coat colour and distinguishing features** | **Sold/retained** | **General comments on health  of animal** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |

Note: Add lines for larger litters

Comment on progress of birth and/or birth complications

# Litter 3 record (live births only):

Birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Female parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Male parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Offspring number** | **Gender** | **Microchip number** | **Breed** | **Coat colour and distinguishing features** | **Sold/retained** | **General comments on health  of animal** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |

Note: Add lines for larger litters

Comment on progress of birth and/or birth complications

# Litter 4 record (live births only):

Birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Female parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Male parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Offspring number** | **Gender** | **Microchip number** | **Breed** | **Coat colour and distinguishing features** | **Sold/retained** | **General comments on health  of animal** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |

Note: Add lines for larger litters

Comment on progress of birth and/or birth complications

# Litter 5 record (live births only):

Birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Female parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Male parent’s microchip # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Offspring number** | **Gender** | **Microchip number** | **Breed** | **Coat colour and distinguishing features** | **Sold/retained** | **General comments on health  of animal** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |

Note: Add lines for larger litters

Comment on progress of birth and/or birth complications

# Male mating/breeding history

|  |  |
| --- | --- |
| Microchip number |  |
| Date of birth |  |
| List dates of breeding clearance certificates and attach copy to record |  |
| Name, address and contact details of issuing veterinary practitioner  (if not stated on certificate) |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Last Breeding clearance certificate issue date** | **Mating date**  (list each day individually) | **Female** | | | **Pregnancy confirmed date** | **Expected due date** | **Birth date** | **# Live births** | | **# Stillborn** | | **Litter number** |
| Name | Microchip # | Breed | Female | Male | Female | Male |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

Note: All breeding clearance certificates must be attached to this record