RECORI	<b>OF LIVES</b>	TOCK MOVEMENT						
Document to support federal and provincial movement requirement for Transport of Animals and Traceability (HAR <sup>*</sup> )								
This document would need to be filled and updated each time animals are loaded, unloaded								
and provided with feed water and rest.								
Note that you may be required to report parts of the information provided herein under other Federal and Provincial Regulations.								
SHIPPER   Name <sup>2</sup> : The shipper is the owner of the animals loaded in the								
	The shipper is the owner of the animals loaded in the vehicle (Optional) <b>YES NO</b>			eu in the				
Departure Premises Identification number								
Departure Premises Identification number (PID) <sup>1</sup> and name: PID: Name:								
Address <sup>2</sup> :								
TRANSPORTER								
Driver(s) Name(s) <sup>2</sup> :	Province an	d License Plate numbe	er of the	convevance tran	sporting			
		(including trailer) <sup>1,2</sup> :			op 01 0116			
Name and address of the transport compar		(						
	iy .							
Conveyance last cleaned and disinfected <sup>2</sup>								
Date: Time:	Р	lace:						
		second sheet if necess	arv)					
Date and time of last access to feed, water and rest (FWR) prior to loading <sup>2</sup>								
Date: Time:								
Date of loading <sup>1,2</sup> (dd/mm/yyyy):		Time of loading <sup>1,2</sup> :		AM 🗆	РМ 🛛			
Animal(s) description (species <sup>1</sup> , group of ag	ate weight, purpose) <sup>,2</sup>	2	Quantity of an	imals <sup>1,2</sup>				
All animals have been determined to be <b>Number of compromised animals loaded</b> <sup>2</sup> :								
fit for transport <sup>2</sup>	b							
Compromised animal(s) description and m	leasures	Animal(s) with speci	ial needs	and measures t	aken <sup>2</sup> :			
taken <sup>2</sup> :								
Area- Floor or container area available to animals <sup>2</sup>		Loading density:						
(m <sup>2</sup> or ft <sup>2</sup> ):		Animals per unit floor area (Kg/m <sup>2</sup> or lbs/ft <sup>2</sup> ):						
If FWR was provided during transport <sup>2</sup> :	Animals unloaded							
Date: Time: P	lace:	Provided onboard 🗆						

CONSIGNEE								
Name <sup>2</sup> :	da	Account identification number of the consignee in the database of the responsible administrator (Optional):						
Destination Premises Identification number (PID) <sup>1</sup> and name: PID: Name:								
PID: Name Address <sup>2</sup> :	•							
Date of unloading (dd/mm/yyyy) <sup>2</sup> :		Time of unloading <sup>1,2</sup> :		AM 🛛	РМ 🛛			
Arrival: All animals arrived in goo YES 口 I (If NO, complete box on right)	NO actions taken to address prior to arrival:				nd			
The herein information is collected for the purpose of federal and provincial acts and regulations and is governed by the Personal Information Protection and Electronic Documents Act Once the information is later collected by the Canadian Food Inspection Agency, the information is also subject to the Privacy Act and the Access to Information Act								
Shipper Signature:	Transporter Signature:		Consignee Signature:					
The transfer of care from the transporter to the receiver occurs immediately upon acknowledgement of the shipment and the accompanying documentation by the receiver.								
LEGEND								
*: HAR – Health of Animals Regulations Part XII and XV <sup>1</sup> : information required under Part XV (Traceability) of the federal Health of Animals Regulations <sup>2</sup> : information required under Part XII (Humane Transportation) of the federal Health of Animals Regulations Last update: October 23, 2019								