

CROWSHALL VETERINARY SERVICES LLP

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LION CODE PACKING CENTRE - SALMONELLA SAMPLE SUBMISSION FORM

Shaded boxes below must be filled in for UKAS/LION CODE Compliance

Company Name		Packing Centre Name / PC Number	
Company Address		Packing Centre Address	
Name of person taking sample(s)		Contact phone number / email (in case we need to discuss issues with samples or paperwork)	

Sample Type (20 x eggs, Single Eggs, Grader Swabs, etc.)	No. Samples	Producer Name/ Farm Name	Producer Establishment Number	LF Number	Sampling Date DD/MM/YYYY	Date of Housing MM/YYYY	Date of Lay DD/MM/YYYY
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Further Information:

PLEASE NOTE: INFORMATION PROVIDED ON THIS FORM WILL BE USED TO GENERATE THE TEST REPORT. THE LABORATORY CANNOT ACCEPT RESPONSIBILITY FOR THE ACCURACY OF THIS INFORMATION OR ANY IMPACT ON THE VALIDITY OF RESULTS. FOR UKAS/NCP/PHS COMPLIANCE PLEASE ENSURE ALL REQUIRED INFORMATION IS SUPPLIED AND ACCURATE.

NON-EGG SAMPLES MUST BE RECEIVED BY CROWSHALL TO ALLOW TESTING TO COMMENCE WITHIN 4 DAYS OF SAMPLING.

EGGS MUST BE SUBMITTED TO ALLOW TESTING TO COMMENCE WITHIN 10 DAYS FROM THE OLDEST DATE OF LAY TO COMPLY WITH THE LION CODE OF PRACTICE.

IT IS THE OWNER'S RESPONSIBILITY TO ENSURE THIS TIMELINE IS ADHERED TO. IT IS RECOMMENDED THAT GUARANTEED NEXT-DAY DELIVERY SERVICES ARE USED FOR SAMPLES SUBMITTED BY POST.