



Animal &
Plant Health
Agency

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| For Laboratory Use Only |
| Attach LIMS generated AF No. label |

Chargeable Submission form- isolation of Mycobacteria from pet animal samples

Send samples to: APHA Weybridge, TB Diagnosis Section: Laboratory Services, Woodham Lane, New Haw, Addlestone, Surrey, KT15 3NB

Contact: **Your local APHA Field Services Office.**

Please return this completed form and any clinical history with your submission to the address above.

Animal details:

| | | | | | |
|------------------------------------|----------------------------------|-----------------------------------|--|--------------------------------|-------------------------------|
| Species | | | Age (years) | | |
| Name/ID | | | | | |
| Purpose (Please tick box) | Pet: <input type="checkbox"/> | Farmed: <input type="checkbox"/> | Park (deer only): <input type="checkbox"/> | Wild: <input type="checkbox"/> | Zoo: <input type="checkbox"/> |
| Owner Details: | | | | | |
| Name | | | | | |
| Address | | | | | |
| County | | | Postcode | | |
| Country (Please tick box) | England <input type="checkbox"/> | Scotland <input type="checkbox"/> | Wales <input type="checkbox"/> | Other..... | |
| CPHH (Required for farmed animals) | _ _ / _ _ _ / _ _ _ _ | | Map reference (OS) (required for wildlife) | | |

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|--|--|
| Material submitted (include type of tissue and sample site) | |
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Submitting veterinary practice:

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|----------------------------|--|---------------|--|
| Name: | | | |
| Address: | | | |
| Email address: for reports | | Telephone No. | |

Local APHA Field Services Office

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Details of the clinical history and/or histology results: Please enclose relevant histopathology reports

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Signature:

Name (Block Capitals) & Date:



INVESTOR IN PEOPLE

Form BA704 (November 2014)

APHA is an Executive Agency of the Department for Environment, Food and Rural Affairs (Defra)