## IMPORTED PIG MEAT DISCREPANCY NOTIFICATION

NOTE - All goods arriving at premises must be accompanied by a biosecurity direction.

**The Department of Agriculture is to be notified immediately if any discrepancies are found.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Site Name and Address:** | | | **State:** |
| **Date received at site: Transport Company :** | | | |
| **Biosecurity Entry Number: Container Number:** | | | |
| **Send to ASG - Fax 1300 665 674 or treatments@agriculture.gov.au** | | | |
| **DISCREPANCY** | **Shipping Container Seal** | Missing  Broken  Number does not match number on  Biosecurity Order.  (Tick **ALL** applicable boxes)  Seal number on Container: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Seal number on Biosecurity Entry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Cartons Damaged**  **Other** | Physical / Mechanical damage   Thawed / Bloodied  Number of cartons damaged: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (All damaged or contaminated cartons must be shrink wrapped)  Will the damaged cartons still be used for processing?  Yes  No If ‘No’, nominate a disposal method below  I request permission to voluntarily dispose of the above cartons under s557 of the Biosecurity Act 2015 in the manner indicated below.   Incineration  Deep burial  100°C for 30 min\*  autoclaving\*  (\*Must be followed by disposal as general waste)  Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Carton Numbers**  **(mandatory)** | Number of cartons on Biosecurity Order: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Number of cartons received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Short: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Extra: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Shipping Container Contaminated**  **(mandatory)** | Is the container contaminated with (blood, meat, exudate etc)?  Yes  No | |

**Name and Position (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**