



SCHEDULE to MOVEMENT LICENCE No:

*

PLEASE USE BLOCK CAPITALS

* Denotes Required Information

1. Despatching Premises Name: *

2. Plant Health Notice Ref No
or Processing Licence Ref No: *

7. Date load left Premises: *

3. Haulier Name: *

4. Driver Name: *

5. Vehicle Registration No:

6. Trailer ID:

8. Despatch Note No/PIN
(if applicable)

9. Name of Destination: *

10. Processing Licence No
of Destination: *

11. Route to destination: *

12. Date arrived at Destination: *

NOTES:

- a. A separate Movement Licence Schedule must accompany each load leaving the infected site
- b. A copy of the relevant Movement Licence must be attached to this Schedule