



## NSW Hatchery Quality Assurance Scheme

### Hatchery dispatch and health statement

#### 1. Dispatch details

|                                             |                                           |             |  |
|---------------------------------------------|-------------------------------------------|-------------|--|
| Hatchery and HQAS accreditation number      |                                           |             |  |
| Batch number                                |                                           |             |  |
| Species                                     |                                           |             |  |
| Parent genetic zone                         |                                           |             |  |
| Parent pit tag numbers (optional)           |                                           |             |  |
|                                             |                                           |             |  |
|                                             |                                           |             |  |
|                                             |                                           |             |  |
| Date                                        | Harvest                                   | Dispatch    |  |
| Number                                      |                                           |             |  |
| Mean fish size                              | Weight (g)                                | Length (mm) |  |
| Quarantine period                           |                                           |             |  |
| Dispatch to                                 | Site                                      |             |  |
|                                             | Name & permit no                          |             |  |
| For Australian Bass nodavirus certification | Date of this seasons negative test result |             |  |

#### 2. General observations

|                                                                       |                                       |                                       |                                       |
|-----------------------------------------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Moribund fish                                                         | <input type="checkbox"/> not detected | Signs of disease                      | <input type="checkbox"/> not detected |
| Lesions or ulcers                                                     | <input type="checkbox"/> not detected | External parasites                    | <input type="checkbox"/> not detected |
| malnourishment                                                        | <input type="checkbox"/> not detected | Physical abnormalities                | <input type="checkbox"/> not detected |
| Non-target species including insects, snails, tadpoles and vegetation |                                       | <input type="checkbox"/> not detected |                                       |
| Abnormal colour or markings                                           |                                       | <input type="checkbox"/> not detected |                                       |

### 3. Microscopic observations

Number of fish examined (minimum of 10)

|                                                         | Present and treated      | Not detected             |
|---------------------------------------------------------|--------------------------|--------------------------|
| <i>Ichthyophthirius multifiliis</i> (white spot or Ich) | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Chilodonella</i> spp.                                | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Trichodina</i> sp.                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Ichthyobodo necator</i>                              | <input type="checkbox"/> | <input type="checkbox"/> |
| Gill Flukes                                             | <input type="checkbox"/> | <input type="checkbox"/> |
| Others                                                  | <input type="checkbox"/> | <input type="checkbox"/> |

### 4. Declaration

I declare that:

1. all the information provided on this document is true;
2. for stocking, the parents originated in the same broodstock genetic zone as the stocking location: and
3. there has not been a declared disease or unexplained mortality at the hatchery this breeding season OR NSW DPI has approved a negative batch test result for this consignment (attached).

|            |       |
|------------|-------|
| Name:      |       |
| Signature: | Date: |
| Position   |       |