

**CATTLE IMPROVEMENT PLAN** (To be submitted by 15th December 2006)**Section A - Herd Details for Year 2007****Nos.**

Group:		Q.1 Total Number of Members in Your Group		
Name:			Nos.	
Address:		Q.2 Number of Members Who are Farm Assured		
		Q.3 Herd Composition of Group	Cows	Heifers
		3.1 Number of Breeding Females going to the bull in 2007		
Postcode		3.2 Proportion of Herd Mated to Cattle Improvement Scheme Bulls (%)		

Q.4 Bulls	1st Choice	2nd Choice
4.1 Bull Breed(s) Requested		
4.2 Main Qualities Sought from Bull Breed(s) Selected		

Q5 Replacement Policy – Please enter numbers introduced to herd as appropriate

Category\Breed	Dairy/Beef	Beef-cross	Pure Bred
Home Bred			
Bought In			
Other			

Q. 6 Calving Season	Mar to May	Jun to Aug	Sept to Nov	Dec to Feb
6.1 Current Calving Season – Nos. in each period				
6.2 Planned Calving Season – Nos. in each period				

Q.7 Calves (Anticipated Sales)	Nos.	Target Average Weight
7.1 Number of Suckled Calves To Be Sold		
7.2 Number of Stores To Be Sold		
7.3 Number of Finished Animals To Be Sold Liveweight		
7.4 Number of Finished Animals To Be Sold Deadweight		
7.5 Heifer Calves To Be Retained For Breeding		

Cattle Improvement Scheme – Marketing Plan
Describe present target market for the groups' cattle <i>(e.g. where do you sell and who are the buyers)</i>
What are the buyers of your cattle looking for <i>(this could include feedback from purchasers and knowledge of the market)</i>
How do your cattle measure up to the standard required/looked for by buyers <i>(consider factors such as age, weight, breed, presentation, giving examples/feedback from previous customers)</i>
Describe your future marketing strategy and the reasons for choosing this option <i>(this should include a brief analysis of a number of possible outlets and reasons for your chosen route)</i>
What improvements do the group plan to better meet the demands of your chosen market <i>(this could include issues such as tighter calving to allow batching of animals or speaning of calves to improve growth rates when sold as well as selection of breed etc)</i>
Provide a timescale for implementing each of the improvements described above

Cattle Improvement Scheme - Health Improvement Plan

(We recommend you discuss this aspect of your plan with your local vet)

Your Disease/ Health Issues	Cause	Improvement Objective	Treatment or Strategy	Timescale for Improvement	Relevant Biosecurity Measures
<i>Example:- Fluke & worms</i>	<i>Grazings, environment & irregular dosing</i>	<i>Improved Performance</i>	<i>Regular dosing regime (agreed with the vet)</i>	<i>Immediate</i>	<i>Better Grazings Management</i>

General Biosecurity Plan:

- 1.
- 2.
- 3.
- 4.

Cattle Improvement Scheme – Training Needs

The training needs of the Group and individuals within the Group should be assessed principally in relation to issues and actions identified in the Marketing, Health and Breeding improvement plans. This may include for example a need for more focused market research, greater understanding and awareness of cattle health issues – identification and treatment, and knowledge of condition scoring and liveweight assessment.

Please indicate in the table below the training needs of the group and proposed action to address these needs. Your local Development Manager will be able to assist in identifying training services/suppliers. (see attached map)

	Training Needs Identified	Proposed Action	Individuals to receive training and timescale
Marketing			
Health			
Breeding			
Other			

Name of Township/Group _____

I hereby claim the £100 grant available for submission of a completed Cattle Improvement Plan, subject to plan approval, to accompany our application for participation in the Cattle Improvement Scheme (Interim 2007.)

All payments under the Cattle Improvement Scheme are now paid directly into bank accounts. Please provide the following information:-

(PLEASE ENSURE THAT ALL LINES MARKED WITH * ARE COMPLETE, IF THESE LINES ARE NOT FULLY COMPLETED THEN IT MAY RESULT IN A DELAY IN SENDING OUT YOUR CATTLE IMPROVEMENT PLAN PAYMENT IF APPROVED)

1	*Township/Group Name	
	*Address 1	
	Address 2	
	Address 3	
	*Town/City	
	*Postcode	
	Phone	
	Fax	
	e-mail	
	2	*Bank/Building Society Name
*Bank Address 1		
Bank Address 2		
Bank Address 3		
*Town/City		
*Postcode		

3 *Sort Code

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4 *Bank/Building Society Account Name (e.g. your name or business name in which the account is held)

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5a *Full Bank Account Number (including leading zeros)

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5b *Bank Account Type (Tick appropriate box) Deposit Current

6 Building Society Roll Number

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Signed: _____

Grazings Clerk/Secretary (please indicate)

Date: _____

FOR OFFICIAL USE ONLY		
Decision: _____	Authorising Officer: _____	Date: _____