**Schedule 13 – Contractors Key Personnel**

**Veterinary Practice Name:**

**Practice NIFAIS Code:**

**Email address** to receive

communication from TB Contract Team:

**Phone number** to receive

communication from TB Contract Team:

**Alternative Phone number** to receive

communication from TB Contract Team:

**Use additional**

**page if necessary**

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| **Veterinary Surgeon Name** | **SAVS or AVS?** | **APHIS Code** | **RCVS Registration Number** |
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Include information on locum / freelance workers.

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| **Administrative staff name** |
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**Note:** Any change in Key Personnel must be dealt with in accordance with clause 14.2 of the General Terms and Conditions of Contract. The Contractor must inform the Authority, preferably before a change of Key Personnel (addition or removal of personnel) by sending this form to the Contract Manager at TB.CM@daera-ni.gov.uk

**Schedule 13 Additional page**

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| **Veterinary Surgeon Name** | **SAVS or AVS?** | **APHIS Code** | **RCVS Registration Number** |
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