



# COVID – 19 PROTOCOLS

## COMMERCIAL EQUINE TRANSPORT CARRIER APPLICATION

TRANSPORT COMPANY NAME: \_\_\_\_\_

REGISTERED COMPANY NAME (if different): \_\_\_\_\_

COMPANY ABN: \_\_\_\_\_

PRIMARY LOCATION OF BUSINESS: \_\_\_\_\_

### NATURE OF TRANSPORT UNDERTAKEN

STATE WIDE TRAVEL (QUEENSLAND):  YES  NO

REGIONAL BASED TRAVEL ONLY :  YES  NO

IF YES, WHICH REGION: \_\_\_\_\_

INTERSTATE TRAVEL:  YES  NO

I hereby agree to abide by the conditions and determinations as prescribed by the State Government of Queensland, Racing Queensland and the Queensland Racing Integrity Commission in relation to the transportation of Thoroughbred Racehorses, during the COVID-19 period.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Company Representative: \_\_\_\_\_