**Animal Health Data**

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**MSA Authorisation Form**

**[Date]**

The Manager

Animal Health Data

177 Bennetts Road,

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[data@animalhealthdata.com.au](mailto:data@animalhealthdata.com.au)

I, **[NAME]**, as the Authorised Representative for **[FEEDLOT]** provide authorisation for Animal Health Data to access the MSA database on behalf of **[FEEDLOT]** for the limited and exclusive purpose of data analysis within the Animal Health database.

The data obtained from the MSA database related to **[FEEDLOT]** shall not be provided to any third party by Animal Health Data without my written authorisation.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of **[FEEDLOT]**. Date: \_\_\_\_/\_\_\_\_/2019