**OBRAZAC 31. Evidencija Plana hranidbe za kategoriju telad**

PLAN HRANIDBE ZA TELAD

OPG/ODGOVORNA OSOBA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADRESA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MIBPG \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BROJ TELADI U SKUPINI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAZA UZGOJA (TJELESNA MASA ILI TJEDNI UZGOJA)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TRAJANJE FAZE: od \_\_\_\_\_\_\_\_\_ do \_\_\_\_\_\_\_\_\_\_

NADLEŽNI SAVJETODAVAC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (velikim štampanim slovima), potpis ili paraf \_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | KRMIVA, MLIJEKO, MLIJEČNA ZAMJENA | POTREBNO PO TELETU DNEVNO (kg/l) | UKUPNE DNEVNE POTREBE (kg/l) | UKUPNE MJESEČNE POTREBE (kg/l) | UKUPNE GODIŠNJE POTREBE (kg/l) | NAPOMENA |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |