

Veterinary certificate to EU

Part I : Details of consignment presented

I.1. Consignor Name Address Postal code / Region Country	I.2. Certificate reference number	I.2.a. TRACES reference number :
	I.3. Central Competent Authority	
	I.4. Local Competent Authority	
	I.5. Consignee Name Address Postal code / Region Country	
I.6. Person responsible for load in EU		
I.7. Country of origin, ISO code	I.8. Region of origin, Code	I.9. Country of destination ISO code
I.10. Region of destination Code		
I.11. Place of origin Holding <input type="checkbox"/> Semen centre <input type="checkbox"/> Establishment <input type="checkbox"/> Name Approval number Address Name Approval number Address Name Approval number Address		
I.12. Place of destination		
I.13. Place of loading Address Approval number		I.14. Date of departure
I.15. Means of transport Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Railway wagon <input type="checkbox"/> Road vehicle <input type="checkbox"/> Other <input type="checkbox"/> Identification::: Document:		
I.16. Entry BIP in EU Name BIP unit no.:		I.17. No.(s) of CITES
I.18. Description of commodity		I.19. Commodity code (HS code)
I.20. Quantity		
I.21. Temperature of products		I.22. Number of packages
I.23. Identification of container/Seal number		I.24. Type of packaging
I.25. Commodity certified as: Breeding <input type="checkbox"/> Fattening <input type="checkbox"/> Slaughter <input type="checkbox"/> Approved bodies <input type="checkbox"/> Artificial reproduction <input type="checkbox"/> Quarantine <input type="checkbox"/> Game restocking <input type="checkbox"/> Registered horses <input type="checkbox"/> Pets <input type="checkbox"/> Circus <input type="checkbox"/> Relaying <input type="checkbox"/> Other <input type="checkbox"/> Humane consumption <input type="checkbox"/> Animal feedingstuff <input type="checkbox"/> Further process <input type="checkbox"/> Pharmaceutical use <input type="checkbox"/> Technical use <input type="checkbox"/>		
I.26. For transit to 3rd Country by EU		I.27. For import or admission into EU Definitive import <input type="checkbox"/> Horses Re-entry <input type="checkbox"/> Temporary admission horses <input type="checkbox"/>
I.28. Identification of the commodity Species (scientific name) Breed/category Identification system Identification number Age Sex Quantity Test Age(dd/mm/yyyy) Age(Weeks) Age(Months)		

**92/260 Temporary registered horses from CA, HK, JP, KR,
MO, MY, SG, TH and US**

Part II: Certification

<p>II. Health information</p> <p>I. Health information</p> <p>I, the undersigned, certify that the horse described above meets the following requirements:</p> <p>(a) It comes from a country where the following diseases are compulsorily notifiable: African horse sickness, Dourine, Glanders, Equine encephalomyelitis (of all types including VEE), Infectious anaemia, Vesicular stomatitis, rabies, anthrax.</p> <p>(b) It has been examined today and shows no clinical sign of disease (2).</p> <p>(c) It is not intended for slaughter under a national programme of infectious or contagious disease eradication.</p> <p>(d) During the last 40 days immediately preceding the exportation it has been resident on holdings under veterinary supervision in:</p> <ul style="list-style-type: none"> - the country of dispatch, (3) and / or (3) - Member States of the Community, (3) and / or (3) - United Arab Emirates, Australia, Bulgaria, Belarus, Canada, Switzerland, Greenland, Hong Kong, Croatia, Iceland, Japan, Republic of Korea, Former Yugoslav Republic of Macedonia, Macao, Malaysia (peninsula), Norway, New Zealand, Romania, Russia (1), Singapore, Thailand, Ukraine, United States of America, Federal Republic of Yugoslavia (1). <p>If it has been moved to the country of dispatch from a country listed in the third indent, it was imported with at least the same animal health requirements as if the horse was imported directly into the European Community. (3)</p> <p>(e) It does not come from the territory or in cases of official regionalization according to EEC legislation from a part of the territory of a third country in which:</p> <ul style="list-style-type: none"> (i) Venezuelan equine encephalomyelitis has occurred during the last two years; (ii) Dourine has occurred during the last six months; (iii) Glanders has occurred during the last six months; (iv) Vesicular stomatitis has occurred during the last six months, (3) or (iv) the animal was tested by a virus neutralization test for Vesicular stomatitis on (5), this being within 10 days of export, with negative result at 1 in 12 (4); (3) (v) in the case of an uncastrated male animal older than 180 days, either equine viral arteritis has been officially recorded during the last six months, (3) or the animal was tested (4) on a blood sample taken within 21 days of export on (5) by virus neutralization test for equine viral arteritis with negative result at a dilution of 1 in 4; (3) or an aliquot of its entire semen taken within 21 days of export on (5) was tested by virus isolation test for equine viral arteritis with negative result (4); (3) or the animal was vaccinated on (5) against viral arteritis under official veterinary supervision with a vaccine approved by the competent authority, according to the following programme for initial vaccination and has been re-vaccinated at regular intervals (4); <p>Programmes for initial vaccination against equine viral arteritis:</p> <p>Instruction: Cross out vaccination programmes that do not apply to the animal described above.</p> <ul style="list-style-type: none"> (a) Vaccination was carried out on the day a blood sample was taken that subsequently proved negative in a virus neutralization test at a dilution of 1 in 4; or (b) Vaccination was carried out during a period of isolation of not more than 15 days under official veterinary supervision, commencing on the day a blood sample was taken that was tested during that time with negative result in a virus neutralization test at a dilution of 1 in 4; or (c) Vaccination was carried out when the animal was at an age of 180 to 270 days, during a period of isolation under official veterinary supervision. During the isolation period two blood samples taken at least 10 days apart proved a stable or declining antibody titre in a virus neutralization test for equine viral arteritis; (3) (3) <p>(f) It does not come from the territory or from a part of the territory of a third country considered, in accordance with EEC legislation, as infected with African horse sickness.</p> <ul style="list-style-type: none"> - It was not vaccinated against African horse sickness. (3) or - It was vaccinated against African horse sickness on (4) (5). (3) <p>(g) It does not come from a holding which was subject to prohibition for animal health reasons nor had contact with equidae from a holding which was subject to prohibition for animal health reasons:</p> <ul style="list-style-type: none"> (i) during six months in the case of Equine encephalomyelitis, beginning on the date on which the equidae suffering from the disease are slaughtered; (ii) in the case of infectious anaemia, until the date on which, the infected animals having been slaughtered, the remaining animals have shown a negative reaction to two Coggins tests carried out three months apart; (iii) during six months in the case of Vesicular stomatitis; (iv) during one month from the last recorded case, in the case of rabies; (v) during 15 days from the last recorded case, in the case of anthrax, (3) or (v) if all the animals of species susceptible to the disease located on the holding have been slaughtered and the premises disinfected, the period of prohibition shall be 30 days, beginning on the day on which the animals were destroyed and the premises disinfected, except in the case of anthrax, where the period of prohibition is 15 days. (3) <p>(f) It does not come from the territory or from a part of the territory of a third country considered, in accordance with EEC legislation, as infected with African horse sickness.</p> <ul style="list-style-type: none"> (i) It was subjected to a Coggins test for Infectious anaemia on (5) this being within three months of export, with negative result (4). (j) It was not vaccinated against Venezuelan equine encephalomyelitis during the last six months (4). <p>(k) either it was vaccinated against Western and Eastern equine encephalomyelitis with inactivated vaccine on (5) or Japanese B-encephalitis on (5), this being within six months and at least 30 days of export (4), (3) or</p> <p>it was subjected to haemagglutination inhibition tests to Western and Eastern equine encephalomyelitis on two occasions with an interval of 21 days between the two tests, the second of which must have been carried out during 10 days prior to dispatch on (5) and on (5), with either negative reactions, if it has not been vaccinated (4), or without an increase in the antibody count, if it has been vaccinated more than six months ago (4) (6). (3)</p> <p>(l) If the equidae comes from Thailand, it was subjected to a complement fixation test for glanders on (5) and for dourine on (5) this within 10 days of export with negative results at 1 in 10 (4). (3)</p> <p>(m) it was not vaccinated against West Nile Virus (3) or</p> <p>(m) it was vaccinated against West Nile Virus with an inactivated vaccine an at least two occasions at an interval of between 21 to 42 days, the last vaccination being carried out not later than 30 days prior to dispatch on (5) (4). (3)</p> <p>2.I have a written declaration signed by the owner (3) or the representative (3) (name), stating that:</p> <ul style="list-style-type: none"> - the horse will be sent directly from the premises of dispatch to the premises of destination without coming into contact with other equine animals not accompanied by such a certificate, in a vehicle cleansed and disinfected in advance with a disinfectant officially recognized in the country of dispatch, - the conditions of point I. (d) are fulfilled. - the horse will be resident inside the European Community for a period not longer than 90 days; - this horse has either remained in (exporting country) since birth (3) or entered (exporting country) on (5). (3) <p>DECLARATION</p>	<p>II.a. Certificat reference number</p> <p>II.b. TRACES reference number</p>
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Part II: Certification

II. Health information	II.a. Certificat reference number	II.b. TRACES reference number
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The undersigned, owner (3) or the representative (3), of the horse described above declares that:
- agrees with the statement indicated in paragraph 2;

3.Date and place of entry into the territory of the Community:
Date of export:

4.Where the horse subsequently moves from the Member State referred to in point II to another Member State, the term of the certificate must be extended for a further 10 days by an official veterinarian of the Member State of dispatch. The total period of residence on the territory of the Community must not be more than 90 days.

I, the undersigned, have examined the horse today and certify that it meets the conditions of Directive 90/426/EEC and in particular, the requirements of point 1. (b), (c), (g) and (h) of this certificate.
- Date of examination
- Place of examination
- Place of destination

5.The certificate is valid for 10 days. In the case of transport by ship, the time is prolonged by the time of the voyage.

- (1) Or part of territory in accordance with Article 13 (2) of Directive 90/426/EEC.
- (2) The certificate must be issued on the day of loading of the animal for dispatch to the Member State of destination or on the last working day before embarkation and accompanied by the identification document (passport) during the time of residence in the Community.
- (3) Delete as appropriate.
- (4) The test(s) carried out, their results and the vaccination have to be entered in the identification document (passport).
- (5) Insert date.
- (6) WEE and EEE vaccination or testing requirements apply only to Canada and the United States of America; Japanese B-encephalitis vaccination applies to Hong Kong, Japan, Republic of Korea, Macau, Malaysia (Peninsula), Singapore, Thailand.

Official veterinarian or official inspector

Name (in Capital):
Local Veterinary Unit:
Date:
Stamp

Qualification and title:
LVU N°:
Signature: