Export Health Certificate

	I.1. Versender					I.2. IMSOC-Bezugsnummer					
	Name				I.2.a. Lokale Bezugsnummer						
	Adresse										
	Land ISO- Ländercode										
				Lanuci Cout							
	I.5. Empfänger					I.3. Zentrale zuständige Behörde					
	Name					I.4. Zuständige	e örtliche Behörde				
	Adresse			***							
	Land			ISO- Ländercode							
ŀ	I.7. Ursprungsland				ISO-	I.9. Bestimmu	ngsland			ISO-	
:	i orsprungsiana			Ländercode	Länd						
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`	I.8. Ursprungsregio	n			Code	I.10. Region des Bestimmungsorts					
	I.11. Versandort					I.12. Bestimmungsort					
	Name					Name					
	Adresse					Adresse					
	Zulassungsnumme	er				Zulassungsnu	mmer				
	Land ISO- Ländercode					Land ISO- Ländercode					
				Lanuercoue					rander code		
	I.13. Ladeort					I.14. Datum ur	nd Uhrzeit des Abtrans	ports	<u> </u>		
Name											
	Adresse										
	Zulassungsnumme	er									
1	Land			ISO- Ländercode							
				Bulldercode							
	I.15. Transportmitt	el				I.16 Entry Poir	nt				
	Тур	Dokument		Identifikation			.6 Entry Point				
						-					
	I.18. Beförderungsk	pedingunge				I.17. Begleitdo	kumente				
	Umgebungstemper										
onigenungstemperatur 🗀				Bezugsnum mer des Handelspapi		Ausstellungs datum					
						ers		uatun	ı		
						Land		Ausste	ellungs		
•	I.19. Containernum	ımer/Plomb	ennur	nmer							
ŀ	I.20. Waren zertifiz	riert für/als									
	Schlachtung	2010101017010		Futtermittel \square		Pharmazeutis	che Verwendung 🗆	Produ	ction \square		
	Mast □		Breeding and product	tion 🗆		liche Vermehrung 🗆		Production of petfood \square			
	Breeding □		Sonstiges		Menschlicher Verzehr 🔲		Technische Verwendung \square				
ITO ITO ITO ITO IND ITO	Vermittlung \square										
-	I.21. Für die Durch	fuhr durch e	ein Dr	ittland \Box		I.22. Für die D	urchfuhr durch Mitglie	edstaate	en 🗆		
	Country			ISO-							
				Ländercode				100			
	EU Exit Authority			BCP code	I.22. Für die Durchfuhr durch Mitgliedstaaten Country ISO- Ländercode						
	EU Entry Authority			BCP code							
	I.23. Gesamtanzahl an Packungen I.24. Gesamtmenge I.28. Angaben zur versendeten Sendung		I.24. Gesamtmenge		I.25. Nettogesamtgewicht		I.25. Bruttogesamtgewicht				
	_		sendi	инд							
	1. 01 LEBENDE TIE 0104 Schafe und		bna								
		_	citu								
	010410 Schafe Erzeugnis Art Menge Nettogewicht Packu				Dackungeenge	reanzahl					
	ri rengino		rai t		wienge	Nettogewicht			Packungsanzahl		
	Identifikationsnun	nmer				Identifikation	ssystem				
							-				
J											

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				(02) 1:100					op more opposite carrier	
	II. Gesundheit	sinformationer	ı							
	II.1.	II.1. Animal health attestation								
	I, the undersigned (1) □ [official veterinarian](1) □ [veterinarian responsible for the establishment of origin and authorised by the competent authority] certify that the animals described in part I meet the following requirements:									
Part II: Certification	_	II.1.1	Country/te	rritory of origin						
			they come from the country or territory described in box I.7 where rabies is a notifiable disease, Have been introduced on (dd/MM/YYYY) into the territory described under point II.1 from the EU territory with code That date was authorised to import the animals into GB							
		or								
art]		II.1.2	Premises of origin as described in box I.11,							
Pa			(a) which is registered by the competent authority of the country or to described in box I.7;							
		 (b) which is not subjected to any restrictions relating to a national program the control of infectious diseases, which the animals on this certificate susceptible to; 								
			(c)	where there have been	n nc	clinical	cases of ra	bies for	the last 6 months.	
			(d)	in which they have rento GB,	mai	ned since	e birth or fo	or the la	ast 30 days before dispatch	
		II.1.3	Animals							
			(a)	Were born and kept in	ı caj	ptivity si	nce birth.*			
			(b) Were resident in the country or territory of dispatch since birth.*							
			(c) have not come into contact with other animals not complying with at least the same health requirements as described in this certificate for the last 30 days and during their transportation from the premises of origin to the place of shipment;							
			(d)	were examined by an official veterinarian within 48 hours of loading and showed no clinical sign of disease and are fit for the intended transport;						
			(e)	are not animals to be killed under a national programme for the eradication of diseases.						
			(f)	(for lagomorph only) have come from a holding in which no animal showed clinical signs of myxomatosis.						
				* Delete as appropriate	e.					
	(1)(2)	II.1.4	Rabies vac	cination*						
	they have been vaccinated against rabies on the following vaccine(s) (name of vaccine (s) used);]									
	(1)(4)	II. 1.5	Parasite treatment*							
			they have been treated at least twice in the 40 days before dispatch to GB against internal and external parasites with the following product(s) . Specify the active ingredients and the doses of the products used ;]							
			*Delete as appropriate.							
		II.1.6	Loading or	the means of transport	t					
	They have been loaded for dispatch to GB on (dd/mm/yyyy)(4) in the means of transport described in box I.15 that were cleaned and disinfected before loading with an officially authorised disinfectant and so constructed that faeces, urine, litter or fodder could not flow or fall out of the vehicle or container during transportation.									

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EU	ROPÄISCI	HE UNION	(GB) Model OTH: Other Rabies Susceptible Species GBHC175E							
	II. Gesundhei	tsinformatione	1							
	Notes									
	(*) Those c	ountries sul nd Switzerla	oject to the transitional import arraind.	ngements include: an EU men	nber State; Liechtenstein;					
J	-		neans the country of dispatch.							
Part II: Certification	References to European Union legislation within this certificate are references to direct EU legislation which has been retained in Great Britain (retained EU law as defined in the European Union (Withdrawal) Act 2018).									
ru	References	s to Great Br	itain in this certificate include Char	nel Islands and Isle of Man.						
 9	Part I:									
Part II	-	Box reference I.15:	Registration number (railway wagons or container and lorries), flight number (aircraft name (ship) is to be provided. In case of unloading and reloading, the consignor must in the BCP of entry into GB.							
	-	Box reference I.16:	Do not use this box until the end of the transitional staging period.							
	-	Box reference I.28:	transponder, crate or container nu container must be identified in suc	y the identification system (tag, tattoos, brand, chip, her number). Large quantities of small animals, the crates or in such a way that the original or transit holding or the last entre or organization prior to export can be traced back to the						
	-	Box reference I.28:	Age: months; Sex (M = male, F = fe	male, C = castrated);						
	Part II:	1.20.								
		(1)	Keep as appropriate							
		(2)	Vaccination is not compulsory, but if the animals have been vaccinated, information on the vaccine(s) used and the time of vaccination must be filled in.							
		(3)		rasite treatment is not compulsory, but if the animals have been treated, information on e product(s) used and the time of vaccination must be filled in.						
		(4)	Date of loading. Imports of these animals shall not be allowed when the animals we loaded either prior to the date of authorisation for exportation to GB of the country mentioned under boxes I.7 and I.8, or during a period where restrictive measures hadopted by GB against imports of these animals from that country/territory.							
	DECLARAT	TION BY THE	OWNER OR THE REPRESENTATIVE OF THE OWNER (GBHC175E)							
	I, the unde		ify that the animals described in part I meet the following requirements (delete where							
		a)	Were born and bred in captivity.							
	and	b)	Came from a holding registered wi	ith the Competent Authority.						
For Information: If none of the above can be complied with then you will need to contact the Animal Plant H Agency (APHA) Centre for International Trade to apply for an Import Licence under The Rabies (Importation Dogs, Cats and Other Mammals) Order 1974.										
Name (in capital letters): Signature:										
Date										
	Certifying Off Name (in ca Datum der U Stempel			Qualification and title Unterschrift						

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