Export Health Certificate

T	I.1. Consignor					I.2. IMSOC Reference				
	Name					I.2.a. Local Reference				
-	Address									
	Country ISO Code									
ŀ	I.C. Compients					I 2 Control con				
	I.5. Consignee						mpetent authority petent authority			
1	Name Address					1.4. Local com	peterit audiority			
	Country			ISO Code						
Į,										
raiti. Detans of consignification	I.7. Country of original	in			ISO Code	I.9. Country of	destination			ISO Code
<u>ا</u> ز	I.8. Region of origin Code					I.10. Region of	destination			
3	I.11. Place of Dispatch					I.12. Place of d				
3	Name					Name				
١	Address					Address				
	Approval Number					Approval Number				
	Country ISO Code					Country ISO Code				
3	I.13. Place of Loadin	ng				I.14. Date and	time of departure			
	Name						unio or departure			
	Address									
	Approval Number									
	Country			ISO Code						
ŀ	III Maana of Tron	anant				I 16 Entwy Doir	n+			
+	I.15. Means of Tran		1	14		I.16 Entry Poir	it.			
		Internation transport	nai	Identification						
		document				-				
						-				
						-				
Ī	I.18. Transport con	ditions				I.17. Accompa	nying documents			
	Ambient 🗆 💮	Chilled \square		Controlled Fro	ozen 🗆	Accompanyi				
				temperature \square		ng document		Date o	f issue	
						reference				
						Country		Place of issue)Î	
	I.19. Container No /	.19. Container No / Seal No								
ŀ	I.20. Certified as									
	Production \square			Pharmaceutical use		Fattening \square			ng and product	ion 🗆
	Other \square			Production of petfood	ı 🗆	Human consu		Slaugh		
- 1	Breeding 🗆			Relaying \square		Animal Feedir	ngstuff 🗆	Artific	ial reproductio	n 🗆
	Technical use \square									
ŀ	.21. For transit through a third country					I.22. For transit through Member State(s)				
	Country EU Exit			ISO Code						
	Authority			BCP code		Country		ISO Co	de	
	EU Entry Authority			BCP code						
ŀ				I.24. Total quantity	otal quantity		I.25. Total net weight		I.25. Total gross weight	
ŀ	I.28. Description of	consignme	ent							
	_	_		I, NOT ELSEWHERE SP	ECIFIED OR IN	CLUDED				
				of animals (other than			of, fresh, chilled, froze	n, salted	, in brine, dried	l or smoked
				achs of animals (other		-				
	smoked									
	05040000 G smoked	iuts, bladde	ers and	stomachs of animals (other than fish), whole and pie	ces thereof, fresh, chil	led, froz	en, salted, in bi	rine, dried or
	Commodity		Specie	s	Quantity		Net weight		Package count	
	commounty		opecie	<u> </u>	Quantity		The mergin		- acruge coulit	
	Identification num	ıber			•	Identification	system		•	
	Tuentification number				- racminication	0,000111				
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	II. Health information								
	I, the undersigned official veterinarian, hereby certify, that the fresh ovine meat described in Part l of this certificate:								
	AH/T104B Territory requirements								
	has been ol	has been obtained in the territory/ies with code: which, at the date of issuing this certificate:							
Part II: Certification		has been free for 12 months from rinderpest, and during the same period no vaccination against this disease has taken place, and							
	(*)EITHER	□ [(b)	has been free for 12 months from foot-and-mouth disease, and during the same period no vaccination against this disease has taken place;]						
	(*)AND/OR	□ [(b)	(b) has been considered free from foot-and-mouth disease since (dd/mm/yyyy), without having had cases/outbreaks afterwards, and authorised to export this meat by , of . (dd/mm/yyyy);]						
	(*)AND/OR	□ [(b)	meets GB requirements fo	r territor	y/ies with supplemen	tary gu	arantee code A;]		
	AH/E004 Es	tablishmen	t requirements (holding)						
	has been ol	otained fror	m animals coming from hol	dings:					
	(a) in which none of the animals present therein have been vaccinated against (*) \square [foot-and-mouth disease or] rinderpest; and								
	(*)EITHER	HER [(b) in which in these holdings, and in the holdings situated in their vicinity within 10 km, there has been no case/outbreak of foot-and-mouth disease or rinderpest during the previous 30 days;]							
	(*)AND/OR	□ [(b)	that meet the GB requirent code(s) (*) \square [A] (*) \square [J]		holdings in territory/i	es with	supplementary guarantee		
	AH/E007 Establishment requirements (holding)								
	has been obtained from animals coming from holdings not subject to prohibition as a result of an outbreak of ovine or caprine brucellosis during the previous six weeks;								
	AH/E300A Establishment requirements (slaughterhouse)								
	has been obtained in an establishment around which, within a radius of 10 km, there has been no case/outbreak of the diseases referred to in point AH/T during the previous 30 days or, in the event of a case/outbreak of disease, the preparation of meat for importation to Great Britain has been authorised only after slaughter of all animals present, removal of all meat, and the total cleaning and disinfection of the establishment under the control of an official veterinarian;								
	AH/A001 Animal requirements (residency)								
	has been obtained from animals that:								
	(*)EITHER □ [have remained in the territory described in AH/T since birth, or for at least the last three months before slaughter;]								
			een introduced on es with code(s) iin;]		,,,,	_	described in AH/T from the mport this fresh meat into		
		☐ [have b Great Brita	een introduced on iin];	(do	d/mm/yyyy) into the to	erritory	described in AH/T, from		
	AH/A606 Animal requirements (other)								
	has been obtained from animals which:								
	(a) have been transported from their holdings in vehicles, cleaned and disinfected before loading, to an approved slaughterhouse without contact with other animals which did not comply with the conditions referred to in AH/T104B, AH/A001, AH/E004 and AH/E007;								
	(b)		ghterhouse, have passed an ticular, have shown no evic				he 24 hours before slaughter I/T104B.		
	(c)	have been	slaughtered on (dd/mm/yyyy).	(dd/m	m/yyyy) or between		(dd/mm/yyyy) and		
	(*) \square [(d) meets GB requirements for animals coming from territory/ies with supplementary guarantee code SG;]								
	AH/P002 Product requirements								

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EU	ROPEAN U	INION	(GB) Ovine and ca	iprine fresh meat/minced r	neat (OVI) GBHC320 (V1.0)				
	II. Health infor	rmation							
Part II: Certificat			en obtained and prepared without required in this certificate.]	contact with other meats not	complying with the				
	(*)AND/OR □ [meets GB requirements for product originating in territories that require with supplementary guarantee code(s) (*) □ [A] (*) □ [F] ;]								
	Animal We	Animal Welfare							
	AW/001 Animal welfare								
	The product of animal origin described in Part I of this certificate derives from animals which have been handled in the slaughterhouse before and at the time of slaughter or killing in accordance with GB animal welfare requirements.								
	Public Health								
	I, the undersigned official veterinarian, declare that I am aware of the relevant requirements of the GB Regulations, and certify that the meat described in Part I of this certificate was produced in accordance with those requirements, in particular that:								
	PH/E100B E	Establishmer	nt requirements						
	the establishment(s) where the (*) \square [meat] (*) \square [minced meat] come(s) from, operate(s) under the HACCP principles in accordance with GB regulations;								
	PH/P100 Pr	PH/P100 Production requirements							
	the (*) \Box [r minced means	ant GB regulations and, the							
	PH/I001 Ins	pection req	uirements						
	the meat has been found fit for human consumption following ante-mortem and post-mortem inspection accordance with GB regulations;								
	PH/MK002	PH/MK002 Marking requirements							
	the (*) □ [c the GB regu	_	arts of the carcass] (*) \square [meat] (*	i) ☐ [minced meat] has been	marked in accordance with				
PH/MB001B Microbiological criteria									
	the (*) □ [r regulations	t in the relevant GB							
	PH/RP001 R	Residue plan	s						
the guarantees provided by the residue monitoring plans submitted to GB by the country of origin ar accordance with GB regulations;									
	PH/S101 Storage and transportation requirements								
	the (*) \square [meat] (*) \square [minced meat] has been stored and transported in accordance with the relevant GB regulations;								
	PH/D004 Bovine spongiform encephalopathy (BSE)								
	with regard to bovine spongiform encephalopathy (BSE):								
	(*)EITHER	(1)	\Box [the country or region is classif	fied with a negligible BSE risk	and;				
	(a)	the animals	s have been slaughtered in complia r stunning;	nce with GB regulations in re	gards laceration of certain				
		the product regulations	does not contain and is not derive;	d from specified risk material	l, in compliance with GB				
	(d) the product (*) □ [is] (*) □ [is not] derived from ovine or caprine mechanically separated meat and complies with GB regulations; and								
	(*) \square [(d) if the animals originate from a country or region classified with an undetermined BSE risk:								
	(i) they hav	e not been f	ed with meat-and-bone meal or gre	eaves, and					
		-	was produced and handled in com ion with nervous and lymphatic tis	_	with regard to				
	(*)AND/OR	(2)	\square [the country or region is classif	fied with a controlled BSE risk	c and;				

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EUROPEAN UNION (GB) Ovine and caprine fresh meat/minced meat (OVI) GBHC320 (V1.0)

ъс	ROPEAN C	JNION (GB) Ovine and caprine fresh meat/fillinded meat (OVI) GBHC320 (VI.0)							
	II. Health info	rmation							
Part II: Certification	(a)	the animals have been slaughtered in compliance with GB regulations in regards laceration of certain tissues after stunning; and							
	(b)								
	(*)AND/OR	AND/OR (3)							
	(a)	the animals were not fed meat-and-bone meal or greaves derived from ruminants;							
	(b)	the animals have been slaughtered in compliance with GB regulations in regards laceration of certain							
	(1)	tissues after stunning;							
	(c)	the product does not contain and is not derived from specified risk material, nervous and lymphatic tissues exposed during the deboning process; or mechanically separated meat, in compliance with GB regulations;]							
д	(*) Keep as Certifying Offi	appropriate. icer							
	Name (in cap								
	Date of signa Stamp	ture Signature							

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