

Part I: Description of consignment	I.1. Consignor Name Address Country ISO Code		I.2. IMSOC reference		I.2.a. Local reference I.3. Central Competent Authority I.4. Local Competent Authority	
	I.5. Consignee Name Address Country ISO Code		I.6. Operator conducting assembly operations independently of an establishment Name Address Approval Number Country ISO Code			
	I.7. Country of origin ISO Code		I.9. Country of destination ISO Code			
	I.8. Region of origin Code		I.10. Region of destination Code			
	I.11. Place of dispatch Name Address Approval Number Country ISO Code		I.12. Place of destination Name Address Approval Number Country ISO Code			
	I.13. Place of loading Name Address Approval Number Country ISO Code		I.14. Date and time of departure			
	I.15. Means of Transport		I.16. Transporter			
	Mode	International transport document	Identification		Name Address Activity ID Country ISO Code	
					I.17. Accompanying documents	
					Commercial document reference	Date of issue
				Country	Place of issue	
I.18. Transport conditions						
I.19. Container No / Seal No						
I.20. Certified as						
Event or activity near borders <input type="checkbox"/>		Further processing <input type="checkbox"/>		Quarantine or similar establishment <input type="checkbox"/>		
Further keeping <input type="checkbox"/>		Products for human consumption <input type="checkbox"/>		Technical use <input type="checkbox"/>		
Other <input type="checkbox"/>		Ornamental aquaculture establishment <input type="checkbox"/>		Confined establishment <input type="checkbox"/>		
Travelling circus/animal act <input type="checkbox"/>		Germinal products <input type="checkbox"/>		Live aquatic animals for human consumption <input type="checkbox"/>		
Release into the wild <input type="checkbox"/>		Dispatch centre <input type="checkbox"/>		Registered equidae <input type="checkbox"/>		
I.21. For transit through a third country <input type="checkbox"/>						
Third country		ISO Code				
Exit point		BCP code				
Entry point		BCP code				
I.22. For transit through Member State(s) <input type="checkbox"/>		I.23. For export <input type="checkbox"/>				
Member State		ISO Code		Third country		
				ISO Code		
				Exit point		
				BCP code		
I.25. Journey Log						
I.27. Total quantity		I.28. Total gross weight				
I.30. Description of consignment						
Commodity	Species	Sex	Identification system	Identification Number		
Quantity		Age				

Part II: Certification	II. Health information		
	<p>I, the undersigned official veterinarian, hereby certify:</p> <p>II.1. The other carnivores(1)(2) of the consignment described in Part I meet the following requirements:</p> <p>II.1.1. They are identified:</p> <p>(3) <input type="checkbox"/> either [individually;]</p> <p>(3) <input type="checkbox"/> and/or [as a group of animals of the same species kept together during the movement to destination;]</p> <p>II.1.2. They have undergone a clinical examination or a clinical inspection on _____ (insert date dd/mm/yyyy) within the the 48 hour period prior to departure and have not shown symptoms or clinical signs of diseases.</p> <p>II.1.3. They come from a registered or approved establishment in which infection with rabies virus in kept terrestrial animals has not been reported during the 30 day period prior to departure and in which to the best of my knowledge and as declared by the operator, there were no abnormal mortalities with an undetermined cause.</p> <p>II.2. The other carnivores(1) of the consignment described in Part I meet the following requirements:</p> <p>(3) <input type="radio"/> either</p> <p>[II.2.1. They have received a complete primary course of anti-rabies vaccination and at least 21 days have elapsed since the completion of the primary anti-rabies vaccination carried out in accordance with the validity requirements set out in Part I of Annex VII to Commission Delegated Regulation (EU) 2020/688, and any subsequent revaccination was carried out within the period of validity of the preceding vaccination.]</p> <p>(3) <input type="radio"/> or</p> <p>[II.2.1. [They are intended for direct transport in accordance with Article 58(2) of Delegated Regulation (EU) 2020/688 to:</p> <p>(3) <input type="radio"/> either [the confined establishment indicated in Box I.20 of Part I;]</p> <p>(3) <input type="radio"/> or [the establishment indicated in Box I.20 of Part I where these animals are kept as fur animals as defined in point 1 of Annex I to Commission Regulation (EU) No 142/2011.]]</p> <p><input type="checkbox"/> [II.2.2. The canidae, other than dogs, due to their scheduled destination(4) indicated in Box I.10, or in Box I.11 where regionalisation is applied:</p> <p>(3) <input type="radio"/> either [have been treated against Echinococcus multilocularis in accordance with Part 2(2) of Annex VII to Delegated Regulation (EU) 2020/688;]]</p> <p>(3) <input type="radio"/> or [have not been treated against(5) Echinococcus multilocularis;]]</p> <p>Identificat ion</p> <p>Anti- echinococ cus treatment</p> <p>Name and Date manufact [dd/mm/y urer of the yyy] and product time [00:00]of treatment</p> <p>Administering veterinarian</p> <p>Name in capitals, stamp and signature</p>		

