Part I: Description of consignment

I.1. Consignor	I.2. IMSOC reference	I.2.a. Local reference
Name		I.3. Central Competent Authority
Address		I.4. Local Competent Authority
Country ISO Code		

I.5. Consignee	I.6. Operator conducting assembly operations independently of an establishment
Name	Name
Address	Address
Country ISO Code	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	I.12. Place of destination
Name	Name
Address	Address
Approval Number	Approval Number
Country ISO Code	Country ISO Code

I.13. Place of loading	I.14. Date and time of departure
Name	
Address	
Approval Number	
Country ISO Code	

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

Other ☐   Pollination ☐   Further keeping ☐

I.21. For transit through a third country ☐

Third country	ISO Code
Exit point	BCP code
Entry point	BCP code

I.22. For transit through Member State(s) ☐	I.23. For export ☐
Member State ISO Code	Third country ISO Code
	Exit point BCP code

I.25. Journey Log

I.26. Total number of packages	I.27. Total quantity	I.28. Total net weight	I.28. Total gross weight

I.30. Description of consignment

Commodity	Species	Breed/Category	Quantity	Net weight

Package count	Batch number

	II. Health information		

Part II: Certification

I, the undersigned official veterinarian, hereby certify, that:

II.1. The animals in the consignment described in Part I meet the following requirements:

II.1.1. The animals have not shown signs of occurrence of Aethina tumida (Small hive beetle) during the visual examination carried out within the 48 hour period prior to departure.

II.1.2. Their packaging and any accompanying feed or other material have not shown signs of presence of small hive beetle during the visual examination carried out within the 48 hour period prior to departure.

II.2. According to official information, the animals come from an establishment situated in the centre of a circle of at least 100 km radius, where infestation with small hive beetle has not been reported and which is not restricted due to a suspected case or the confirmed occurrence of infestation with small hive beetle.

II.3. To the best of my knowledge and as declared by the operator, the animals in the consignment come from an establishment where there are no abnormal mortalities with an undetermined cause and they have not been in contact with bumble bees which did not comply with the requirements referred to in point II.2.

II.4. This certificate is valid for 10 days from the date of issuing. In the case of transport by waterway/sea of animals, the period of 10 days for the validity of the certificate may be extended by the duration of the journey by waterway/sea.

Notes:

In accordance with the Agreement on the withdrawal of the United Kingdom of Great Britain and Northern Ireland from the European Union and the European Atomic Energy Community, and in particular Article 5(4) of the Protocol on Ireland / Northern Ireland in conjunction with Annex 2 to that Protocol, references to European Union in this certificate include the United Kingdom in respect of Northern Ireland.

This animal health certificate shall be completed according to the notes for the completion of certificates provided for in Chapter 2 of Annex I to Commission Implementing Regulation (EU) 2020/2235.

Part I:

Box reference I.11: "Place of dispatch": Indicate a registered establishment.

Box reference I.12: "Place of destination": Indicate a registered or approved establishment.

Box reference I.30: "Category": indicate either of the following: queens with maximum 20 attendants, colonies with brood or other.

Certifying Officer/Official veterinarian

Name (in capital letters)　　　　　　　　　　　　　Authority name
Date of signature　　　　　　　　　　　　　　　　Signature
Stamp