

<b>Part I : Details of consignment</b>	I.1. Consignor Name Address Country		ISO Code	I.2. IMSOC Reference I.2.a. Local Reference		
	I.5. Consignee Name Address Country		ISO Code	I.3. Central competent authority		
				I.4. Local competent authority		
	I.7. Country of origin		ISO Code	I.9. Country of destination		
				ISO Code		
	I.8. Region of origin		Code	<del>I.10. Region of destination</del>		
	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 Entry Point	
	Mode	International transport document	Identification			
I.18. Transport conditions Ambient <input type="checkbox"/>				I.17. Accompanying documents Document Type Accompanying document reference Date of Issue Country Place of issue		
I.19. Container No / Seal No						
I.20. Certified as Unregistered equidae <input type="checkbox"/> Registered equidae <input type="checkbox"/>						
I.21. For transit through a third country <input type="checkbox"/>				I.22. For transit through Member State(s) <input type="checkbox"/>		
Country	ISO Code			Country	ISO Code	
EU Exit Authority	BCP code					
EU Entry Authority	BCP code					
I.24. Total quantity				I.25. Total gross weight		
I.28. Description of consignment						
#1.	Commodity	Identification system	Identification number	Age		
	Species	Gender	Quantity			

Part II: Certification	II. Health information		
	<p>Part II. Certification</p> <p>Animal Health</p> <p>I, the undersigned official veterinarian, hereby certify, that the animal described in this certificate;</p> <p>(*EITHER ○ [does not come from the territory or part of the territory of a Member State or Norway which is the subject of restrictions for reasons of African horse sickness;]</p> <p>(*OR ○ [it comes from the territory or part of the territory of a Member State or Norway, which is subject to restrictions for reasons of African horse sickness, has remained for at least 40 days prior to dispatch in the vector proved quarantine station of (insert name of quarantine station) and has undergone a test for the detection of antibodies to the African horse sickness virus as described in GB requirements carried out simultaneously on blood samples taken on two occasions with an interval of between 21 and 30 days on (insert date) and during the 10 days prior to dispatch on (insert date)]</p> <p>(*EITHER ○ [with negative result in each case if it was not vaccinated against African horse sickness;] ]</p> <p>(*OR ○ [without an increase in antibody count if it was vaccinated against African horse sickness;] ]</p> <p>AH/E023 Establishment requirements</p> <p>has not been obtained from a holding which was subject to prohibition for animal health reasons, which laid down at least one of the following conditions:</p> <p>(*EITHER ○ [not all animals on the holding of species susceptible to the diseases mentioned hereafter were slaughtered and the prohibition lasted for at least:</p> <p>(a) in the case of equidae suspected of having contracted dourine</p> <p>(*EITHER ○ [six months beginning on the date of the last actual or possible contact with a sick or infected with Trypanosoma equiperdum animal;] ]</p> <p>(*OR ○ [in the case of a stallion until the animal is castrated;] ]</p> <p>(b) in the case of glanders as per GB requirements;</p> <p>(c) in the case of equine encephalomyelitis of any type</p> <p>(*EITHER ○ [six months as per GB requirements;] ]</p> <p>(*OR ○ [in which equine encephalomyelitis has not occurred during the period of 6 months prior to the date of dispatch;] ]</p> <p>(d) in the case of equine infectious anaemia as per GB requirements;</p> <p>(e) in the case of vesicular stomatitis,</p> <p>(*EITHER ○ [six months from the last case;] ]</p> <p>(*OR ○ [in which vesicular stomatitis has not occurred during the period of 6 months prior to the date of dispatch;] ]</p> <p>(f) in the case of rabies, one month from the last case;</p> <p>(g) in the case of anthrax, 15 days from the last case.]</p> <p>(*OR ○ [following cases of dourine, glanders, equine encephalomyelitis of all types, equine infectious anaemia, vesicular stomatitis, rabies or anthrax, all animals on the holding of species susceptible to the disease in question were slaughtered or killed and the prohibition lasted for 30 days or 15 days in the case of anthrax, beginning on the day on which, following the destruction of the animals, the disinfection of the premises, was satisfactorily completed;]</p> <p>AH/A116F Animal requirements (Vaccinations)</p> <p>(*EITHER (a) ○ [was not vaccinated against African horse sickness;]</p> <p>(*OR (b) ○ [was vaccinated against African horse sickness on (insert date);]</p> <p>(*EITHER (i) ○ [at least two months prior to certification;] ]</p> <p>(*OR (ii) ○ [at least two months prior to entry into the quarantine station;] ]</p> <p>AH/A726E Animal requirements</p> <p>(*EITHER (a) ○ [is a registered equine as defined in GB legislation;]</p> <p>(*OR (b) ○ [is an unregistered equine;]</p>		

<b>Part II: Certification</b>	II. Health information			
	(c)	was examined today and found free of clinical signs of disease and of obvious signs of ectoparasite infestation;		
	(d)	is not intended for slaughter under a national programme of infectious or contagious disease eradication;		
	AH/A732 Animal requirements (freedom from disease)			
	(a)	to the best of my knowledge, it has not been in contact with quidae suffering from an infectious or contagious disease in the 15 days prior to this declaration;		
	(b)	at the time of the inspection, it was fit to be transported on the intended journey in accordance with GB legislation.		
	(*) Keep as appropriate.			
	Certifying Officer			
	Name (in capital letters)		Qualification and title	
	Date of signature		Signature	
	Stamp			