

Part I: Description of consignment	I.1. Consignor		I.2. IMSOC reference		I.2.a. Local reference	
	Name				I.3. Central Competent Authority	
	Address					
	Country		ISO Code		I.4. Local Competent Authority	
	I.5. Consignee			I.6. Operator conducting assembly operations independently of an establishment		
	Name			Name		
	Address			Address		
	Country			Country		
				Approval Number		
				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			Country			
			ISO Code			
			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			
			Approval Number			
			Country			
			ISO Code			
			I.17. Accompanying documents			
			Document Type			
			Accompanying document reference			
			Date of Issue			
			Country			
			Place of issue			
I.18. Transport conditions						
Chilled <input type="checkbox"/>		Ambient <input type="checkbox"/>		Frozen <input type="checkbox"/>		
I.19. Container No / Seal No						
I.20. Certified as						
Travelling circus/animal act <input type="checkbox"/>		Registered equidae <input type="checkbox"/>		Relaying <input type="checkbox"/>		
Technical use <input type="checkbox"/>		Live aquatic animals for human consumption <input type="checkbox"/>		Dispatch centre <input type="checkbox"/>		
Exhibition <input type="checkbox"/>		Release into the wild <input type="checkbox"/>		Germinal products <input type="checkbox"/>		
Ornamental aquaculture establishment <input type="checkbox"/>		Other <input type="checkbox"/>		Further processing <input type="checkbox"/>		
Confined establishment <input type="checkbox"/>		Event or activity near borders <input type="checkbox"/>		Quarantine or similar establishment <input type="checkbox"/>		
				Further keeping <input type="checkbox"/>		
				Products for human consumption <input type="checkbox"/>		
				Slaughter <input type="checkbox"/>		
				Organic fertilizers and soil improvers <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.24. Estimated journey time			I.25. Journey Log			

Part I: Description of consignment	I.27. Total quantity		I.28. Total gross weight	
	I.30. Description of consignment			
	1. 01 LIVE ANIMALS 0106 Other live animals Mammals: 010619 Other 01061900 Other			
	#1.	Commodity	Sex	Identification system
	Species	Quantity	Age	

	II. Health information			
Part II: Certification	I, the undersigned official veterinarian, hereby certify:			
	II.1.	The other carnivores (1) (2) of the consignment described in Part I meet the following requirements:		
		II.1.1.	They are identified:	
	(3)	<input type="radio"/>	either [individually;]	
	(3)	<input type="checkbox"/>	and/or [as a group of animals of the same species kept together during the movement to destination;]	
		II.1.2.	They have undergone a clinical examination or a clinical inspection on _____ (insert date dd/mm/yyyy) within the last 48 hours prior to the time of departure and have not shown symptoms or clinical signs of diseases.	
		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 last 30 days prior to the date of 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.	
	(3) either	<input type="radio"/>	II.1.4. They come from registered or approved establishment, or a zone not subject to restrictions affecting the species of animals to be moved and established for reasons of diseases listed for those species or diseases subject to emergency measures relevant for those species, and they have not been in contact with kept animals of a listed species of a lower health status for an adequate period.]	
	(3) or	<input type="radio"/>	II.1.4. They come from registered or approved establishment, or a zone subject to restrictions affecting the species of animals to be moved and established for _____ (4), but derogations from movement restrictions have been granted, and:	
	(3)	<input type="checkbox"/>	[they comply with the requirements set out in _____ (5);]]	
	(3)	<input type="checkbox"/>	[and in particular, they are _____ (6).]]	
	(3) either	<input type="radio"/>	II.1.5. They have received a complete primary course of anti-rabies vaccination and at least 21 days have elapsed since the date of completion of the primary anti-rabies vaccination carried out in accordance with the validity requirements set out in Part 1 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.]	
	(3) <input type="radio"/>	II.1.6.	[They are intended for direct transport in accordance with Article 58(2) of Delegated Regulation (EU) 2020/688 to:	
	(3)	<input type="radio"/>	either [the confined establishment indicated in box I.20;]	
	(3)	<input type="radio"/>	or [the establishment indicated in box I.20 where these animals are kept as fur animals as defined in point 1 of Annex I to Commission Regulation (EU) No 142/2011.]	
<input type="checkbox"/>	(3)	II.1.7.	The canidae, other than dogs, due to their scheduled destination (7) indicated in box I.10, or in box I.11 where regionalisation is applied:	
(3)	<input type="radio"/>	either [have been treated against Echinococcus multilocularis in accordance with Part 2, point 2, of Annex VII to Delegated Regulation (EU) 2020/688:		
	Identification	Anti-echinococcus treatment	Administering veterinarian	
	Name and manufacturer of the product	Date and time [dd/mm/yyyy] [00:00] of treatment	Name in capitals, stamp and signature	
]				
(3) <input type="radio"/>	[have not been treated against (8) Echinococcus multilocularis.]]			

Part II: Certification	<p>II. Health information</p>		
	<p>(3) or ○ [are intended for direct transport in accordance with Article 58(2) of Delegated Regulation (EU) 2020/688 to:</p> <p style="margin-left: 20px;">(3) ○ either [the confined establishment indicated in box I.20]</p> <p style="margin-left: 20px;">(3) ○ or [the establishment indicated in box I.20] where these animals are kept as fur animals as defined in point (1) of Annex I to Regulation (EU) No 142/2011.]]]</p> <p>II.2. Arrangements are made to transport the consignment in accordance with Article 4 of Delegated Regulation (EU) 2020/688.</p> <p>II.3. This animal health certificate is valid for 10 days from the date of issuing. In the case of transport by waterway/sea of animals, the period of validity of the certificate may be extended by the duration of the journey by waterway/sea.</p> <p>Animal welfare attestation</p> <p>At the time of inspection, the animals covered by this animal health certificate were fit to be transported in accordance with the provisions of Council Regulation (EC) No 1/2005 on the intended journey due to start on (insert date).</p>		
	<p>Notes:</p> <p>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 the Union in this animal health certificate include the United Kingdom in respect of Northern Ireland.</p> <p>This animal health certificate shall be completed in accordance with the notes for the completion of certificates provided for in Chapter 2 of Annex I to Commission Implementing Regulation (EU) 2020/2235.</p> <p>Part I:</p> <p>Box reference I.11: "Place of dispatch": Indicate a registered or an approved establishment of dispatch.</p> <p>Box reference I.12: "Place of destination": Indicate a registered or an approved establishment of destination.</p> <p>Box reference I.30: "Identification number": Indicate for each animal of the consignment its identification.</p> <p>Part II:</p> <p>(1) There may be one or more animals in the consignment.</p> <p>(2) Other carnivores means animals of the species belonging to the order Carnivora other than dogs, cats and ferrets as defined in Article 3, point (32), of Delegated Regulation (EU) 2020/688.</p> <p>(3) Delete if not applicable.</p> <p>(4) Insert the name of the disease(s).</p> <p>(5) Insert the specific reference to the article(s), title and number of the relevant legal act(s) adopted by the Commission providing for those requirements.</p> <p>(6) Insert the specific attestation(s) provided for in and required by the relevant legal act(s) adopted by the Commission as referred to in Article 126(1), points (b)(ii) and (iii), of Regulation (EU) 2016/429 of the European Parliament and of the Council.</p> <p>(7) Member States or parts thereof listed in the Annex to Commission Implementing Regulation (EU) 2018/878.</p> <p>(8) The table referred to in point II.2.2 shall be used to document the details of the treatment against <i>Echinococcus multilocularis</i>, in accordance with Part 2, point 2, of Annex VII to Delegated Regulation (EU) 2020/688, if administered after the date the animal health certificate was signed and prior to the scheduled entry into Member States or parts thereof listed in the Annex to Implementing Regulation (EU) 2018/878.</p>		
	<p>Certifying Officer/Official veterinarian</p>		

Part II: Certification	II. Health information		
	Name (in capital letters)	Qualification and title	
	Date of declaration	Signature	
	Stamp		