ANNEX

In the Annex, Part 1 is replaced by the following:

PART 1 Model animal health certificate for imports into the Union of dogs, cats and ferrets

COL	ואואנ	f :			Ve	terinary certificate to EU			
	l.1.	Consignor	1.2.	Certificate re	ference No	1.2.a.			
		Name Address	1.3.	I.3. Central competent authority					
		Country	1.4.						
		Tel.							
	1.5.	Consignee	1.6.						
nent		Name							
Jun		Address							
nsić		Country							
00 p		Tel.							
Part I: Details of dispatched consignment	1.7.	Country of ISO I.8. origin code	1.9.	Country of destination	ISO I.10 code	O. Region of Code destination			
Details	l.11.	Place of origin	l.12.	Place of dest	ination	l			
۳ ::		Name Approval number		Name	,	Approval number			
Ра		Address		Address	,	Approvar number			
		Name Approval number		Addicas					
		Address							
		Name Approval number							
		Address							
	I.13.	Place of loading	I.14.	Date of depa	rture				
	l.15.	Means of transport	I.16.	Entry BIP in E	EU				
		Aeroplane ☐ Ship ☐ Railway wagon ☐							
		Road vehicle Other	1.17.						
		Identification							
		Documentary references							
	I.18.	Description of commodity			I.19. Comm	odity code (HS code) 010619			
						I.20. Quantity			
	I.21.		I.22. Number of packages						
	123	Seal/Container No				124			

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I.25. Com	nmodities certif Others	ied for:	Pets		A	pproved bodie	s 🗖
1.26.				I.27. Fo	or import or adm	ission into EU	
I.28. Iden	tification of the	commodities					
	pecies ntific name)	Identification system	n	Identi	fication number		te of birth /mm/yyyy]

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		II.	Health in	formation		II.a. Certif	icate refere	nce No	II.b.		
			,	ersigned off ountry) certif			(insert name				
ion			II.1.	come from holdings or businesses described in Box I.11 which are registered by the competent authority and are not subject to any ban on animal health grounds, where the animals are examined regularly and which comply with the requirements ensuring the welfare of the animals held;							
Part II: Certification			II.2.	journey at	no signs of diseases and were fit to be transported for the intended at the time of examination by a veterinarian authorised by the competent within 48 hours prior to the time of dispatch;						
Part II:		(¹) either	[II.3.	are destined for a body, institute or centre described in Box I.12 and approved in accordance with Annex C to Council Directive 92/65/EEC, and come from a territory or third country listed in Annex II to Commission Implementing Regulation (EU) No 577/2013.]							
		(¹) or	[II.3.	21 days vaccinatio Annex III Council, a	have on (²) ca to Regu and any	12 weeks old at the time of vaccination against rabies and at least e elapsed since the completion of the primary anti-rabies carried out in accordance with the validity requirements set out in egulation (EU) No 576/2013 of the European Parliament and of the any subsequent revaccination was carried out within the period of preceding vaccination (3);] and					
(¹) either [II.3.1. they come from a territory or third countr Commission Implementing Regulation (EU) No the current anti-rabies vaccination are provided						ition (EU) No 5	77/2013 and details of				
			(¹) or	- t	third courant 1 courables a the veto 30 days date of greater out with details of	untry listed in A of Annex II to (antibody titration erinarian author after the prece issue of this than 0,5 IU/mI nin the period of the current a	nnex I to Co Commission In test (4), ca prised by the eding vaccin certificate, (5) and any of validity conti-rabies va	ed to transit tommission Deci Regulation (Elearried out on a see competent a sation and at lead proved an anti-subsequent resofthe preceding accination and tomovided in the tax	sion 200- J) No 20 blood sa authority st 3 mon body titr vaccination g vaccination	4/211/EC or in 6/2010, and a mple taken by not less than the prior to the e equal to or on was carried ation, and the of sampling for	
	Transponder		or tattoo					Validity of vaccination			
	num code	of the	Date of nplantation and/or eading (⁶) d/mm/yyyy]	Date o vaccina [dd/mm/y	ition	Name and manufacturer of vaccine	Batch number	From [dd/mm/yyyy]	to [dd/mm/yyyy]	Date of blood sampling [dd/mm/yyyy]	
];	
			(¹) either	- ! !	Delegat <i>Echinoc</i> by the Commis	ed Regulation (coccus multiloci administering	(EU) No 115 ularis, and t veterinaria d Regulation	State listed in A 52/2011 and have he details of the n in accordar on (EU) No	ve been t e treatme nce with	reated against ent carried out Article 7 of	
			(¹) or	[II.4. I	have no	t been treated	against <i>Echi</i>	inococcus multi	ocularis.]		

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II. Health inform	ation	II.a. Certificate refere	nce No	II.b.	
Transporter or totto	Anti-echinoc	occus treatment	Administering veterinarian		
Transponder or tattoo alphanumeric code of the dog	Name and manufacturer of the product	Date [dd/mm/yyyy] and time of treatment [00:00]	Name in capitals, stamp and signature		
				1	

Notes

- (a) This certificate is meant for dogs (Canis lupus familiaris), cats (Felis silvestris catus) and ferrets (Mustela putorius furo).
- (b) This certificate is valid for 10 days from the date of issue by the official veterinarian. In the case of transport by sea, that period of 10 days is extended by an additional period corresponding to the duration of the journey by sea.

Part I:

- Box I.11: Place of origin: name and address of the dispatch establishment. Indicate approval or registration number.
- Box I.12: *Place of destination*: mandatory where the animals are destined for a body, institute or centre approved in accordance with Annex C to Council Directive 92/65/EEC.
- Box I.25: Commodities certified for. indicate 'others' where the animals are moved in accordance with Article 5(4) of Regulation (EU) No 576/2013 of the European Parliament and of the Council.
- Box I.28: Identification system: select transponder or tattoo.

Identification number: indicate the transponder or tattoo alphanumeric code.

Part II:

- (1) Keep as appropriate.
- (2) Any revaccination must be considered a primary vaccination if it was not carried out within the period of validity of a previous vaccination.
- (3) A certified copy of the identification and vaccination details of the animals concerned shall be attached to the certificate.
- (4) The rabies antibody titration test referred to in point II.3.1:
 - must be carried out on a sample collected by a veterinarian authorised by the competent authority, at least 30 days after the date of vaccination and 3 months before the date of import;
 - must measure a level of neutralising antibody to rabies virus in serum equal to or greater than 0,5 IU/ml;
 - must be performed by a laboratory approved in accordance with Article 3 of Council Decision 2000/258/EC (list of approved laboratories available at http://ec.europa.eu/food/animals/pet-movement/approved-labs_en);

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	(⁵)	satisfactory results validity of a previou A certified copy of the control of the	s, has been revaccinated ag	l, which following that test v ainst rabies within the period			
	(⁵)				of		
	(⁵)	·	official report from the approved laboratory on the result of the erred to in point II.3.1 shall be attached to the certificate.				
		of his ability and where	e necessary with contacts wit f the laboratory report on the r	ns that he has verified, to the b th the laboratory indicated in results of the antibody titration t	the		
	(6) In conjunction with footnote (3), the marking of the animals concerned by the implantation of a transponder or by a clearly readable tattoo applied before 3 July 20 must be verified before any entry is made in this certificate and must always precede an vaccination, or where applicable, testing carried out on those animals.						
	(7)	The treatment against Ed	chinococcus multilocularis refe	rred to in point II.4 must:			
— be administered by a veterinarian within a period of not more the not less than 24 hours before the time of the scheduled entry of of the Member States or parts thereof listed in Annex I to Comin Regulation (EU) No 1152/2011;					one		
		praziquantel or combination, have	pharmacologically active su	contains the appropriate dose ubstances, which alone or burden of mature and immat the host species concerned.	in		
	(8)	treatment if administere scheduled entry into on	ed after the date the certifica	document the details of a furt ate was signed and prior to parts thereof listed in Annex I	the		
	Official	veterinarian					
	N	lame (in capital letters):		Qualification and title:			
		oate:		Signature:			
	S	Stamp:					