

## DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND RURAL AFFAIRS NORTHERN IRELAND

HEALTH CERTIFICATE 0020 FOR EXPORT OF REGISTERED EQUINES FROM NI TO GB VIA ROI

13	I.1. Consignor				I.2. Certificate		I.2.a. UNN		
뎦	Name				reference no				
consignment	Address								
豆				I.3. Central Competent Authority					
.ц о				DEFRA					
S	Postcode			I.4. Local Competent Authority DAERA					
ö	Tel.								
Ö	I.5. Consignee				I.6. Operator responsible for the consignment:				
ď	Address				Address				
he	<b>*</b>				Postcode				
୍ର	D								
dispatched	Postcode Tel.								
ğ	I.7. Country	ISO code	I.8. Region of	Code	I.9. Country of	ISO	I.10. Region of	Code	
·H	of origin,		origin,		destination	code			
ぴ									
of	I.II. Place of o	rigin			T 12 Place of dest	inatio	un.		
0	Name	Place of Origin			I.12. Place of destination Name				
Ø	Address	<u> </u>			Address				
Details									
ιď	Postcode								
et l	Approval number				Postcode				
Ă	inpprovar namocr				10300000				
••	I.13. Place of 1	Loading			I.14. Date and time	e of de	parture		
Н									
art	Name		·						
H K	Postcode								
Ã	Approval number								
	T 15 Maans of +				1.16. Entry BCP in Great Britain, Channel Islands				
		I.15. Means of transport				or Isle of Man			
	Aeroplane 🗌	Ship 🗌	Railway wagon						
	Road vehi	icle 🗌	Other $\square$		I.17. Accompanying	docume	nts		
	Identification:								
	Authorised trans	Authorised transporter approval number:							
	Transporter deta	ails:							
	I.18. Description	on of animal				.19. Cc	ommodity code (HS	rode)	
	1.10. 2000112010	, or animar					mandaloj dodo (no	,	
					· ·		01.01		
	I.20. Quantity		I.21.		1	.22.			
					1122.				
	I.23. Seal/Conta	ainer No.		I.24.					
	I.25. Animal cer	rtified for:							
	Daniela da la								
	Registered horse	= 🗀							
	I.26. Transit details				I.27. For import of			ritain,	
					Channel Islands or Isle of Man				
	I.28. Identifica	ation of the	animal		l				
	Species	Identificat		Ident	ification number	Age	Sex		
	(Scientific	system							
	Name)					1			
	Equus caballus								

II. Attestation of animal health and welfare	II.a. Certificate reference no	II.b. UNN

- I, the undersigned official veterinarian, hereby certify, that the animal described in Box I.28.: is a registered horse as defined in Article 2(c) of Commission Implementing Regulation (EU) 2018/659;
  - was examined today and found free of clinical signs of disease and of obvious signs of ectoparasite infestation;
    - is not intended for slaughter under a national programme of infectious or contagious disease eradication;
  - 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;

- 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 despatch in the vector proved quarantine station of ......and has undergone a test for the detection of antibodies to the African horse sickness virus as described in Annex IV to Directive 2009/156/EC carried out simultaneously on blood samples taken on two occasions with an interval of between 21 and 30 days on .......... and during the 10 days prior to dispatch on .....
- Either with negative result in each case if it was not vaccinated against African horse
- Or without an increase in antibody count if it was vaccinated against African horse sickness
- Either was not vaccinated against African horse sickness;
  Or was vaccinated against African horse sickness on .....;
- Either at least two months prior to certification
- Or at least two months prior to entry into the quarantine station: 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:
- Either not all animals on the holding of species susceptible to the diseases mentioned hereafter were slaughtered and the prohibition lasted for at least:
- (a) in the case of Equidae suspected of having contracted dourine
- either six months beginning on the date of the last actual or possible contact with a sick or infected with Trypanosoma equiperdum, animal
- or in the case of a stallion until the animal is castrated.
- (b) in the case of glanders, six months beginning on the day on which the equidaee suffering from the disease or subjected with positive result to a test for the detection of the causative pathogen Burkholderia mallei or antibodies to that pathogen, were killed and destroyed.
- (c) in the case of equine encephalomyelitis of any type, six months beginning on the day on which the Equidae suffering from the disease have been slaughtered, except in case of West Nile virus infection, where the period of six months begins on the day the equidae died, have been removed from the holding or fully recovered.
- (d) in the case of infectious anaemia, until the date on which, the infected animals having been slaughtered, the remaining animals have shown a negative reaction to two Coggins tests carried out three months apart.
- (e) in the case of vesicular stomatitis, six months from the last case.
- (f) in the case of rabies, one month from the last case.
- (g) in the case of anthrax, 15 days from the last case.
- Or following cases of dourine, glanders, equine encephalomyelitis, 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.

2/3 en

II. Attestation o	f animal health and welfare	II.a. Certificate reference no	II.b. UNN

and to the best of my knowledge, it has not been in contact with equidae suffering from an infectious or contagious disease in the 15 days prior to this declaration; and at the time of the inspection, it was fit to be transported on the intended journey in accordance with the provisions of Regulation (EC) No 1/2005.

## Notes:

References to European Union legislation within this certificate are references to direct EU legislation which has been retained in Great Britain (retained EU law as defined in the European Union (Withdrawal) Act 2018).

References to Great Britain in this certificate include Channel Islands and Isle of Man.

## Part I:

Box I.15.: Registration number (railway wagons or container and lorries), flight number (aircraft) or name (ship) and other relevant information is to be provided. In case of unloading and reloading, the consignor must inform the competent authority of GB.

Box I.16: Do not use this box until the end of the transitional staging period.

Box I.23.: The container number and the seal number (if applicable) should be included.

Box I.28.: Identification system: The animal must bear an individual identifier which permits linking the animal to the identification document as defined in Article 2(b) of Commission Implementing Regulation (EU) 2018/659. Specify the identification system (such as ear tag, tattoo, brand, transponder) and the anatomic place used on the animal. The number of the accompanying passport must be stated and the name of the competent authority which issued/validated it.

Age: Date of birth (dd/mm/yyyy).

Sex (M = male, F = female, C = castrated).

## Part II:

This health certificate shall:

- (a) be issued on the day of loading or on the last working day before loading of the animal for dispatch to GB;
- (b) be drawn up in at least a language understood by the certifying officer and in English;
- (c) be made out to a single consignee;
- (d) be signed and stamped in a colour different to the colour of the printing;
- (e) consist of a single sheet of paper or all sheets of paper required are part of an integrated whole and indivisible by inserting page numbers and the total number of pages, and each page shall bear the certificate reference number at the top of the page and those pages are stapled and stamped.

Official Veterinarian		
Name (in capital letters):	Qualification and title:	
Address:	Signature:	
Date:		
Stamp:		

en **3/3**