

**COUNTRY**

**Official certificate to the EU**

|   |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---|--------------------------|----------------------------------|----------------------------------|--|---|----------------------------------|-----------------------------|--------------------------|--------------------------|-----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Part I : Details of consignment   | I.1. Consignor           |                                  | I.2. Certificate reference       |  | I.2.a. IMSOC reference                          |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | Name                     |                                  | I.3. Central competent authority |  | Specimen not to be used for imports into the EU |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | Address                  |                                  | I.4. Local competent authority   |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | Country                  |                                  | ISO Code                         |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | I.5. Consignee           |                                  |                                  | I.6. Responsible for the consignment in EU |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | Name                     |                                  |                                  | Name                                       |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | Address                  |                                  |                                  | Address                                    |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | Country                  |                                  |                                  | Country                                    |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | ISO Code                 |                                  |                                  | ISO Code                                   |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   | I.7. Country of origin   |                                  | ISO Code                         | I.8. Region of origin                      |   | Code                             | I.9. Country of destination |                          | ISO 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. Entry BCP                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Mode  |                          | International transport document |                                  | Identification                             |   | Authority                        |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   | Country                          |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| I.18. Transport conditions  |                          |                                  |                                  |  |   | I.17. Accompanying documents     |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Frozen <input type="checkbox"/> Ambient <input type="checkbox"/> Chilled <input type="checkbox"/> |                          |                                  |                                  |  |   | Type                             |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   | Number                           |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| I.19. Container No / Seal No  |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| I.20. Certified as  |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Petfo   | Slaug                    | Furth                            | Pets                             | Regis                                      | Fatte   | Prod                             | Quar                        | Man                      | Othe                     | Trad                        | Bree                     | Circu                    | Appr                     | Cann                     | Anim                     | Artifi                   | Gam                      | Phar                     | Hum                      | Tech                     | Relay                    |
| <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>                   | <input type="checkbox"/>                        | <input type="checkbox"/>         | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| od  | hter                     | er                               | proc                             | equi                                       | ding  | n of                             | antip                       | ure of                   | r                        | esamp                       | ding/                    | s/exh                    | oved                     | ing                      | al                       | cial                     | re                       | mace                     | an                       | tical                    | ing                      |
|   |                          |                                  | ess                              | dae  |   | petfo                            | e                           | petfo                    |                          | les                         | uctio                    | n                        | es                       | try                      | ngstu                    | ducti                    | cking                    | utical                   | Cons                     | Use                      |                          |
|   |                          |                                  |                                  |  |   | od                               |                             | od                       |                          |                             | n                        |                          |                          |                          | on                       |                          | use                      | umpt                     | ion                      |                          |                          |
| I.21. For transit   |                          |                                  |                                  |  |   | I.22. For internal market        |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Non-EU  |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          | I.23. For re-entry       |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| I.25. Quantity  |                          |                                  |                                  |  |   | I.26. Total gross weight         |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| I.27. Description of consignment  |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 1. 01 LIVE ANIMALS  |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0101 Live horses, asses, mules and hinnies  |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Commodity   |                          |                                  | Species                          |  |   | Identification system            |                             |                          | Birth date               |                             |                          | Gender                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Identification Number   |                          |                                  |                                  | Country of Origin                          |   |                                  |                             | Quantity                 |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|   |                          |                                  |                                  |  |   |                                  |                             |                          |                          |                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

II. Health information

Part II : Certification

SPECIMEN

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| Part II : Certification | II. Health information  |  |  |
|                         | <p>II. Animal health attestation</p> <p>I, the undersigned official veterinarian, hereby certify that:</p> <p>II.1. The equine animal described in Part I:</p> <p>II.1.1. is not intended for slaughter for human consumption and not intended for slaughter in the framework of the eradication of a disease communicable to equine animals, and</p> <p>(1) either <input type="checkbox"/> [is a registered equine animal, as defined in Article 2(30) of Commission Delegated Regulation (EU) 2019/2035.]</p> <p>(1) or <input type="checkbox"/> [is a registered horse as defined in Article 2(30) of Delegated Regulation (EU) 2019/2035.]</p> <p>(1) or <input type="checkbox"/> [is an equine animal other than a registered equine animal or a registered horse.]</p> <p>II.1.2. has not shown signs or symptoms of diseases listed for equine animals in Commission Implementing Regulation (EU) 2018/1882 during the clinical examination carried out on _____ (insert date dd/mm/yyyy)(2), this being within the 48 hour period, or in the case of a registered horse within the 48 hour period or on the last working day, prior to departure from the registered establishment.</p> <p>II.1.3. meets the requirements attested in points II.2. to II.5., and where applicable in point II.6., of this certificate;</p> <p>II.1.4. is accompanied by a written declaration, signed by the operator of the animal, which forms part of this certificate.</p> <p>II.2. Attestation on third country, territory or zone thereof and on establishment of dispatch</p> <p>II.2.1. The equine animal described in Part I is dispatched from _____ (insert name of country, territory or zone thereof), a country, territory or zone thereof, which on the date of issuing this certificate has the Code: _____ (3) and is assigned to Sanitary Group _____ (3).</p> <p>II.2.2. In the country or territory of dispatch the following diseases are compulsorily notifiable: African horse sickness, Venezuelan equine encephalomyelitis, infection with <i>Burkholderia mallei</i> (glanders), surra (<i>Trypanosoma evansi</i>), dourine (<i>Trypanosoma equiperdum</i>), equine infectious anaemia, rabies and anthrax.</p> <p>II.2.3. The equine animal described in Part I comes from a country, territory or zone thereof in which there has been no clinical, serological (in unvaccinated equine animals) or epidemiological evidence of African horse sickness during the 24 month period prior to the date of departure of the animal and there have been no systematic vaccinations against African horse sickness during the 12 month period prior to the date of departure.</p> <p>II.2.4. The equine animal described in Part I comes from an establishment situated in a country, territory or zone thereof in which</p> <p>(1) either <input type="checkbox"/> [infection with <i>Burkholderia mallei</i> (glanders) has not been reported during the 36 month period prior to the date of departure of the animal.]</p> <p>(1) or <input type="checkbox"/> [a surveillance and eradication programme for infection with <i>Burkholderia mallei</i> (glanders) recognised by the European Union(2) has been carried out during the 36 month period prior to the date of departure, and</p> <p>(1) either <input type="checkbox"/> [infection with <i>Burkholderia mallei</i> (glanders) has not been reported in the establishment of dispatch during the 36 month period prior to the date of departure of the animal.]]</p> <p>(1) or <input type="checkbox"/> [infection with <i>Burkholderia mallei</i> (glanders) has been reported in the establishment during the 36 month period prior to the date of departure of the animal and following the last outbreak, the establishment has remained under movement restrictions</p> <p>(1) either <input type="checkbox"/> [until the remaining equine animals in the establishment have been subjected to a complement fixation test for infection with <i>Burkholderia mallei</i> (glanders)(4), carried out, with negative results at a serum dilution of 1 in 5, on samples taken at least 6 months after the infected animals have been killed and destroyed.]]]</p> |  |  |

| Part II : Certification | II. Health information |   |  |
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|                         |                        |   |  |
| (1)                     |                        | or ◦ [for at least 30 days from the date of cleaning and disinfection of the establishment, after the last animal of listed species on the establishment was killed and destroyed.]]  |  |
|                         | II.2.5.                | The equine animal described in Part I comes from an establishment situated in a country, territory or zone thereof in which   |  |
| (1)                     |                        | either ◦ [surra has not been reported during the 24 month period prior to the date of departure.]   |  |
| (1)                     |                        | or ◦ [a surveillance and eradication programme for surra recognised by the European Union(2) has been carried out during the 24 month period prior to the date of departure of the animal, and  |  |
| (1)                     |                        | either ◦ [surra has not been reported in the establishment during the 24 month period prior to the date of departure of the animal.]]   |  |
| (1)                     |                        | or ◦ [surra has been reported in the establishment during the 24 month period prior to the date of departure of the animal, and following the last outbreak the establishment has remained under movement restrictions  |  |
| (1)                     |                        | either ◦ [until the remaining animals in the establishment have been subjected to an enzyme-linked immunosorbent assay (ELISA) for trypanosomosis or card agglutination test for trypanosomosis (CATT) at a serum dilution of 1 in 4(4) carried out, with negative results, on samples taken at least 6 months after the last infected animal has been removed from the establishment.]]                                  |  |
| (1)                     |                        | or ◦ [for at least 30 days from the date of cleaning and disinfection of the establishment, after the last animal of listed species on the establishment was either killed and destroyed or slaughtered.]]  |  |
|                         | II.2.6.                | The equine animal described in Part I comes from an establishment situated in a country, territory or zone thereof in which   |  |
| (1)                     |                        | either ◦ [dourine has not been reported during the 24 month period prior to the date of departure of the animal.]   |  |
| (1)                     |                        | or ◦ [a surveillance and eradication programme for dourine recognised by the European Union(2) has been carried out during the 24 month period prior to the date of departure of the animal, and  |  |
| (1)                     |                        | either ◦ [dourine has not been reported in the establishment during the 24 month period prior to the date of departure of the animal.]]   |  |
| (1)                     |                        | or ◦ [dourine has been reported in the establishment during the 24 month period prior to the date of departure of the animal, and following the last outbreak, the establishment has remained under movement restrictions   |  |
| (1)                     |                        | either ◦ [until the remaining equine animals in the establishment, except castrated male equine animals, have been subjected to a complement fixation test for dourine, carried out with negative results at a serum dilution of 1 in 5(4) on samples taken at least 6 months after the infected animals have been killed and destroyed or slaughtered, or the infected entire male equine animals have been castrated.]] |  |
| (1)                     |                        | or ◦ [for at least 30 days from the date of cleaning and disinfection of the establishment, after the last animal of listed species on the establishment was either killed and destroyed or slaughtered.]]  |  |
|                         | II.2.7.                | The equine animal described in Part I comes from an establishment in which  |  |
| (1)                     |                        | either ◦ [equine infectious anaemia has not been reported during the 12 month period prior to the date of departure of the animal.]   |  |
| (1)                     |                        | or ◦ [equine infectious anaemia has been reported during the 12 month period prior to the date of departure of the animal and following the last outbreak the establishment has remained under movement restrictions  |  |

| II. Health information   |  |
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| Part II : Certification  | (1) either <input type="radio"/> [until the remaining equine animals in the establishment have been subjected to an agar gel immuno-diffusion test (AGID or Coggins test) or ELISA(4) for equine infectious anaemia carried out, with negative results, on samples taken on two occasions with a minimum interval of 90 days following cleaning and disinfection of the establishment after the infected animals have been killed and destroyed, or slaughtered.]] |
|  | (1) or <input type="radio"/> [for at least 30 days from the date of cleaning and disinfection of the establishment, after the last animal of listed species on the establishment was either killed and destroyed or slaughtered.]]   |
|  | II.2.8. The equine animal described in Part I comes from an establishment in which   |
|  | II.2.8.1. infection with rabies virus in kept terrestrial animals has not been reported during the 30 day period prior to the date of departure of the animal;   |
|  | II.2.8.2. anthrax in ungulates has not been reported during the 15 day period prior to the date of departure of the animal.  |
|  | II.2.9. To the best of my knowledge and as declared by the operator, the equine animal described in Part I has not been in contact with kept animals of listed species which did not comply with the requirements referred to in points II.2.3. to II.2.8.1 during the 30 day period prior to the date of departure of the animal, and with the requirement referred to in point II.2.8.2. during the 15 day period prior to the date of departure of the animal.  |
|  | II.3. Attestation of residence and pre-export isolation  |
|  | (1) either <input type="radio"/> During the 40 day period prior to the date of its departure, or since birth if it is less than 40 days of age, the equine animal described in Part I has been continuously resident in the country, territory or zone thereof of dispatch or entered the country, territory or zone thereof of dispatch from a Member State of the European Union or Norway.]   |
|  | (1) or <input type="radio"/> During the 40 day period prior to the date of its departure, or since birth if it is less than 40 days of age, the registered horse described in Part I   |
|  | (1) either <input type="radio"/> [has been continuously resident in the country, territory or zone thereof of dispatch;]   |
| (1) or <input type="radio"/> [entered the country, territory or zone thereof of dispatch on one or more occasions from   |  |
| (1) either <input type="checkbox"/> [a Member State of the European Union or Norway;]]   |  |
| (1) and/or <input type="checkbox"/> [a country, territory or zone thereof authorised for entry into the Union of registered horses, and from which it was imported into the country, territory or zone thereof of dispatch under conditions at least as strict as those required in accordance with Union legislation for the entry of registered horses from this country, territory or zone thereof directly to the Union, and which is: |  |
| (1) either <input type="checkbox"/> [assigned to the same Sanitary Group _____ (3) as the country, territory or zone thereof of dispatch;]]]   |  |
| (1) and/or <input type="checkbox"/> [assigned to Sanitary Group A, B or C;]]]  |  |
| (1) and/or <input type="checkbox"/> [China(5)(6), Hong Kong, Japan, Korea Republic, Macao, Singapore, or the United Arab Emirates.]]]  |  |
| (1) either <input type="radio"/> The equine animal described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group A, B, C, D or G, and   |  |
| (1) either <input type="radio"/> [during the 30 day period prior to the date of its departure, or since birth if it is less than 30 days of age or since entry from a Member State of the Union or Norway,   |  |
| (1) either <input type="radio"/> [it has been kept apart from other equine animals, except in case of a foal at foot of his mother, in an establishment situated in a country, territory or zone thereof assigned to Sanitary Group A.]]]  |  |
| (1) or <input type="radio"/> [it has been kept in pre-export isolation from other equine animals, except in case of a foal at foot of his mother, in an establishment situated in a country, territory or zone thereof assigned to Sanitary Group B, C, D or G.]]]   |  |

| II. Health information  |         |  |   |
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| Part II : Certification | (1)     |  | or ○ [it is a registered horse which has been kept in establishments under veterinary supervision during the 30 day period prior to the date of its departure, or since birth if it is less than 30 days of age, or since entry in accordance with point II.3.1 from a Member State of the European Union, Norway or a country, territory or zone thereof which is assigned to Sanitary Group A, B, C, D, E or G,.]   |
|                         | (1)(7)  | or ○<br>[II.3.2.   | The equine animal described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group E, and   |
|                         | (1)     |  | either ○ [during the 40 day period prior to the date of its departure, or since birth if it is less than 40 days of age, or since entry in accordance with point II.3.1 from a Member State of the European Union, Norway or a country, territory or zone thereof which is assigned to Sanitary Group A, B, C, D, E or G, it has been kept  |
|                         | (1)     |  | either ○ [in isolation in an establishment protected from insect vectors.]]   |
|                         | (1)     |  | or ○ [in an establishment under veterinary supervision, and the country, territory or zone thereof of dispatch is recognised by the World Organisation for Animal Health (OIE) as officially free of African horse sickness.]]  |
|                         | (1)     |  | or ○ [is a registered horse which has been kept during the 30 day period prior to the date of its departure, or since birth if it is less than 30 days of age, or since entry in accordance with point II.3.1 from a Member State of the European Union, Norway or a country, territory or zone thereof which is assigned to Sanitary Group A, B, C, D, E or G, in establishments under veterinary supervision, and the country, territory or zone thereof of dispatch is recognised by the OIE as officially free of African horse sickness.]]   |
|                         | (1)(7)  | or ○<br>[II.3.2.   | The registered horse described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group F, and:   |
|                         | (1)     |  | either ○ [during the 40 day period prior to the date of departure it has been kept in the approved quarantine station of _____ (insert name of quarantine station), confined to the vector-protected premises at least from two hours prior to sunset until two hours after sunrise and exercise was provided under official veterinary supervision, following the application of insect repellents in combination with an insecticide effective against Culicoides prior to the removal from the quarantine stables, and in strict isolation from equine animals not being prepared for export under conditions at least as strict as required for entry into the Union.]]   |
|                         | (1)     |  | or ○ [during the 14 day period prior to the date of departure it has been permanently confined in the approved vector-proof quarantine station of _____ (insert name of quarantine station) and constant monitoring of the vector protection has proven absence of insect vectors inside the vector-proof part of the quarantine station.]]   |
|                         | II.4.   | Attestation of vaccination and health tests  |   |
|                         | (1)     | either ○<br>[II.4.1.   | The equine animal described in Part I was not vaccinated against African horse sickness in the country, territory or zone thereof of dispatch and there is no information suggesting previous vaccination.]   |
|                         | (1)     | or ○<br>[II.4.1.   | The equine animal described in Part I was vaccinated against African horse sickness more than 12 months prior to the date of its departure.]  |
|                         | (1)(7)  | or ○<br>[II.4.1.   | The registered horse described in Part I was vaccinated against African horse sickness not more than 24 months and at least 40 days prior to the date of entry in the vector-protected or vector-proof quarantine station situated in a country, territory or zone thereof assigned to Sanitary Group F, and this vaccination consisted of a complete primary course of vaccination against African horse sickness, or a revaccination within the period of validity of the previous vaccination, by administration according to manufacturer's instructions of a registered vaccine which is protective against the circulating serotypes of the African horse sickness virus, and the last vaccination was applied on _____ (insert date).] |
| (1)                     | II.4.2. | The equine animal described in Part I has not been vaccinated against Venezuelan equine encephalomyelitis during the 60 day period prior to the date of its departure, and<br>either ○ [it comes from an establishment situated in a country or territory in which Venezuelan equine encephalomyelitis has not been reported during the 24 month period prior to the date of its departure.] |   |

| Part II : Certification | II. Health information |   |  |
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|                         |                        |   |  |
|                         | (1)                    | or ○ [it comes from an establishment in which Venezuelan equine encephalomyelitis has not been reported during the 6 month period prior to the date of its departure and which is situated in a country, territory or zone thereof in which a surveillance and eradication programme for Venezuelan equine encephalomyelitis recognised by the European Union(2) has been carried out during the 24 month period prior to the date of its departure, and during the 21 day period prior to the date of departure of the animal described in Part I, all equine animals in the establishment have remained clinically healthy, and |  |
|                         | (1)                    | either ○ [the equine animal described in Part I has been kept protected from attacks by insect vectors in a quarantine station, in which any equine animal that showed a rise in daily taken body temperature has been subjected with negative result to a virus isolation test for Venezuelan equine encephalomyelitis(4); and the equine animal described in Part I   |  |
|                         | (1)                    | either ○ [was vaccinated against Venezuelan equine encephalomyelitis with a complete primary course and revaccinated according to manufacturer's recommendations not less than 60 days and not more than 12 months prior to the date of departure;]]  |  |
|                         | (1)                    | or ○ [was subjected to a haemagglutination inhibition test for Venezuelan equine encephalomyelitis(4), carried out, with negative result, on a sample taken not less than 14 days after the date of its entry into the quarantine station.]]  |  |
|                         | (1)                    | or ○ [the body temperature of the equine animal described in Part I has been taken daily, either without a rise or the animal has been subjected to a virus isolation test for Venezuelan equine encephalomyelitis with negative result, and the equine animal described in Part I has been subjected to  |  |
|                         |                        | - a haemagglutination inhibition test for Venezuelan equine encephalomyelitis(4), without an increase in antibody titre, carried out on paired samples taken on two occasions with an interval of 21 days, the second of which was taken during the 10 day period prior to the date of its departure, and   |  |
|                         |                        | - a reverse transcription-polymerase chain reaction (RT-PCR) for the detection of Venezuelan equine encephalomyelitis virus genome(4), with negative result, carried out on a sample taken within the 48 hour period prior to its departure, and  |  |
|                         |                        | - protection from vector attacks during the period after sampling until loading for dispatch, by combined use of approved insect repellents and insecticides on the animal and disinsectization of the stable and the means in which it is transported.]]   |  |
|                         | (1)(7)                 | either ○ [II.4.3. The equine animal described in Part I is dispatched from Iceland, which is certified as officially free from equine infectious anaemia, where it was continuously resident since birth, and did not come into contact with equine animals which have entered Iceland from other countries.]   |  |
|                         | (1)                    | or ○ [II.4.3. The equine animal described in Part I was subjected with negative result to an agar gel immunodiffusion test (AGID or Coggins test) or to an ELISA for equine infectious anaemia(4) carried out on a blood sample taken on _____ (insert date), this being within   |  |
|                         | (1)                    | either ○ [the 30 day period prior to the date of its departure.]]   |  |
|                         | (1)(7)                 | or ○ [the 90 day period prior to the date of its departure from a country, territory or zone thereof assigned to Sanitary Group A.]]  |  |

| II. Health information  |   |   |  |
|-------------------------|---|---|--|
| Part II : Certification | (1)   | <input type="checkbox"/> [II.4.4. The equine animal described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group B, D or E or from China, or from a country or territory in which infection with <i>Burkholderia mallei</i> (glanders) has been reported during the 36 month period prior to the date of departure, and was subjected to a complement fixation test for infection with <i>Burkholderia mallei</i> (glanders)(4) carried out with negative result at a serum dilution of 1 in 5 on a blood sample taken on _____ (insert date), within the 30 day period prior to the date of departure.]  |  |
|                         | (1)   | <input type="checkbox"/> [II.4.5. The equine animal described in Part I is an uncastrated male or female equine animal older than 270 days dispatched from a country, territory or zone thereof assigned to Sanitary Group B, D, E or F, or from China, or from a country in which dourine has been reported during the 24 month period prior to the date of departure, and was subjected to a complement fixation test for dourine(4) carried out with negative result at a serum dilution of 1 in 5 on a blood sample taken on _____ (insert date), within the 30 day period prior to the date of departure, and the equine animal described in Part I has not been used for breeding during the 30 day period prior to and after the date the sample was taken.] |  |
|                         | (1)   | <input type="checkbox"/> [II.4.6. The equine animal described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group E, from Brazil, Bolivia, Uruguay, Malaysia (Peninsula) or from a country or territory in which surra was reported during the 24 month period prior to the date of departure, and was subjected to a card agglutination test for trypanosomosis (CATT)(4), carried out with negative result at a serum dilution of 1 in 4 on a blood sample taken on _____ (insert date), within the 30 day period prior to the date of departure.]   |  |
|                         | (1)(7)  | <input type="checkbox"/> [II.4.7. The equine animal described in Part I is dispatched from a country, territory or zone thereof which is assigned to Sanitary Group E and   |  |
|                         | (3)   | either ◦ [it was subjected to an indirect ELISA or a blocking ELISA for African horse sickness(8), which was carried out by the same laboratory on the same day on blood samples taken on two occasions with an interval of between 21 and 30 days, on _____ (insert date) and on _____ (insert date), the second of which was taken within the 10 day period prior to the date of departure,   |  |
|                         | (3)   | either ◦ [with negative results in each case.]]   |  |
|                         | (3)   | or ◦ [with a positive result in the first sample, and   |  |
|                         | (3)   | either ◦ [the second sample was subsequently tested with negative result in a Real-time RT-PCR(8).]]]   |  |
|                         | (3)   | or ◦ [the two samples were tested without more than a two-fold increase in antibody titre in a virus neutralisation test as described in point 2.4 of Chapter 2.5.1. of the OIE Terrestrial Manual for Diagnostic Tests and Vaccines.]]]  |  |
|                         | (1)   | or ◦ [it was subjected to an indirect ELISA or a blocking ELISA for African horse sickness(8) with negative result on a blood sample taken on _____ (insert date), within the 21 day period prior to the date of departure, and the country or territory of dispatch is recognised by the OIE as officially free of African horse sickness.]]   |  |
| (1)                     | or ◦ [it is a registered horse not vaccinated against African horse sickness and dispatched from a country, territory or zone thereof which is recognised by the OIE as officially free of African horse sickness.]]  |   |  |
| (1)(7)                  | <input type="checkbox"/> [II.4.8. The equine animal described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group F and  |   |  |
| (1)                     | either ◦ [it was subjected to an indirect ELISA or a blocking ELISA for African horse sickness(8) carried out by the same laboratory on the same day on blood samples taken on two occasions with an interval of between 21 and 30 days, on _____ (insert date) and on _____ (insert date), the first sample not taken less than 7 days after introduction into the vector-protected quarantine station, the second sample taken within the 10 day period prior to the date of departure, |   |  |
| (1)                     | either ◦ [with negative results in each case.]]   |   |  |
| (1)                     | or ◦ [with a positive result in the first sample, and   |   |  |



|                         |   |  |  |  |
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| Part II : Certification | II. Health information  |  |  |  |
|                         | (1)   |  | either ◦ [the second sample was subsequently tested with negative result in a Real-time RT-PCR(8).]]]]   |  |
|                         | (1)   |  | or ◦ [the two samples were tested without more than a two-fold increase in antibody titre in a virus neutralisation test as described in point 2.4 of Chapter 2.5.1. of the OIE Terrestrial Manual for Diagnostic Tests and Vaccines.]]]]  |  |
|                         | (1)   |  | or ◦ [it was subjected to an indirect ELISA or a blocking ELISA and a Real-time RT-PCR for African horse sickness(8) carried out with negative result in each case on a blood sample taken on _____ (insert date) not less than 28 days after the date of introduction into the vector-protected quarantine station and within the 10 day period prior to the date of departure.]]   |  |
|                         | (1)   |  | or ◦ [it was subjected to a Real-time RT-PCR for African horse sickness(8), carried out with negative result on a blood sample taken on _____ (insert date) not less than 14 days after the date of introduction into the vector-proof quarantine station and not more than 72 hours before departure.]]   |  |
|                         | II.5.   | Attestation of the transport conditions  |  |  |
|                         | (1)(7)  | either ◦ [II.5.1.  | The equine animal described in Part I is dispatched from a country, territory or zone thereof assigned to Sanitary Group A, B, C, D, E or G and arrangements have been made to transport it directly to the Union, without subjecting the animal to any assembly operation and without coming into contact with other equine animals not complying with at least the same health requirements as described in this health certificate.]  |  |
|                         | (1)(7)  | or ◦ [II.5.1.  | The animal is dispatched from a country, territory or zone thereof which is assigned to Sanitary Group F and arrangements have been made to transport it directly from the vector-protected or vector-proof quarantine station without coming into contact with other equine animals not complying with at least the same health requirements as described in this health certificate  |  |
|                         | (1)   |  | either ◦ [to the airport under vector-protected conditions and arrangements have been made for the aircraft to be cleansed and disinfected in advance with a disinfectant officially recognised in the third country of dispatch, and sprayed against insect vectors just prior to take off.]]   |  |
|                         | (1)   |  | or ◦ [to a sea port in that country, territory or zone thereof under vector-protected conditions and arrangements have been made to transport it on a vessel which is scheduled directly to a port in the European Union without calling into a port situated in a country, territory or zone thereof not approved for the entry into the Union of equine animals, in stalls which were cleansed and disinfected in advance with a disinfectant officially recognised in the third country of dispatch and sprayed against insect vectors just prior to departure.]] |  |
|                         | II.5.2.   | Arrangements have been made and verified to prevent any contact with other equine animals not complying with at least the same health requirements as described in this health certificate during the period from certification until dispatch to the European Union.  |  |  |
|                         | II.5.3.   | The transport vehicles or containers in which the animal is going to be loaded were cleaned and disinfected before loading with a disinfectant officially recognised in the country or the territory of dispatch and they are so constructed that faeces, urine, litter or fodder cannot escape during transportation. |  |  |
| (1)(9) □                | Public health attestation   |  |  |  |
|                         | [II.6.  |  |  |  |
|                         | I, the undersigned official veterinarian, hereby certify, that the equine animal described in this certificate: |  |  |  |
|                         | II.6.1.   | in the country or territory of dispatch has not received:  |  |  |
|                         |   | - any stilbene or thyrostatic substances;  |  |  |
|                         |   | - oestrogenic, androgenic, gestagenic or beta-agonist substances for purposes other than therapeutic or zootechnical treatment (as defined in Council Directive 96/22/EC);   |  |  |

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|                         | II. Health information  |  |  |
| Part II : Certification | <p>II.6.2. fulfils the guarantees covering live equine animals provided by the residue plan submitted and approved in accordance with Article 29 of Council Directive 96/23/EC and it has been dispatched from a country or territory listed for equine animals in the Annex to Commission Decision 2011/163/EU.]</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 European Union in this certificate include the United Kingdom in respect of Northern Ireland.</p> <p>This animal health/official certificate shall be completed according to the notes for the completion of certificates provided for in Chapter 4 of Annex I to Commission Implementing Regulation (EU) 2020/2235.</p> <p>Part I:</p> <p>Box reference I.8: Provide the code of the country, territory or zone thereof of dispatch as appearing in column 2 of Annex IV to Commission Implementing Regulation (EU) 2021/404.</p> <p>Box reference I.27: “Identification system”: The animal must be individually identified with one of the means of identification defined in point (a), (c), (e), or (g) of Annex III to Delegated Regulation (EU) 2019/2035, or be identified by an alternative method in accordance with Article 62 of that Regulation (e.g. brand) provided it is recorded in its identification document (passport). Specify the identification system and the anatomic place used on the animal. If a passport accompanies the animal, its number should be stated and the name of the competent authority which validated it.</p> <p>“Age”: Date of birth (dd/mm/yyyy).</p> <p>“Sex”: M = male, F = female, C = castrated.</p> <p>Part II:</p> <p>(1) Delete as appropriate.</p> <p>(2) The certificate must be issued on the day of loading or on the last working day before loading of the animal for dispatch to the Member State of destination in the Union.</p> <p>The entry into the Union shall not be allowed when the animal was loaded either prior to the date of authorisation for entry into the Union from the respective country, territory or zone thereof referred to in point II.1.1., or during a period where restrictive measures have been adopted by the Union against the entry of equine animals from this country, territory or zone thereof. Check against columns 8 and 9 of Part 1 of Annex IV to Implementing Regulation (EU) 2021/404.</p> <p>(3) Code of the country, territory or zone thereof and the Sanitary Group as appearing in columns 2 and 3 respectively in Part 1 of Annex IV to Implementing Regulation (EU) 2021/404.</p> <p>(4) Tests for glanders, surra, dourine, equine infectious anaemia and Venezuelan equine encephalomyelitis described by the European Union Reference Laboratory for Equine Diseases other than African horse sickness: <a href="https://sitesv2.anses.fr/en/minisite/equine-diseases/sop">https://sitesv2.anses.fr/en/minisite/equine-diseases/sop</a></p> <p>(5) Zone of country or territory authorised for entry into the Union as appearing in columns 2 and 5 respectively of Part 1 of Annex IV to Implementing Regulation (EU) [2021/404].</p> <p>(6) Only authorised if country of dispatch is assigned to Sanitary Group G.</p> <p>(7) Statements that relate entirely and exclusively to a Sanitary Group different from the Sanitary Group to which the country, territory or zone thereof of dispatch is assigned, may be left out, provided that the numbering of the subsequent statements is maintained.</p> <p>(8) Tests for African horse sickness described by the European Union Reference Laboratory for African horse sickness: <a href="https://www.mapa.gob.es/en/ganaderia/temas/laboratorios/lcv/directrices-diagnostico.aspx">https://www.mapa.gob.es/en/ganaderia/temas/laboratorios/lcv/directrices-diagnostico.aspx</a></p> <p>(9) By deleting this point, the equine animal, if intended for free circulation in accordance with the customs procedures laid down in Regulation (EU) No 952/2013 of the European Parliament and of the Council (OJL 269, 10.10.2013, p.1), will be excluded from slaughter for human consumption in the identification document issued in accordance with Union animal health rules.</p> |  |  |

|   |   |                              |       |       |                              |                           |                              |     |     |       |       |       |       |
|---|---|------------------------------|-------|-------|------------------------------|---------------------------|------------------------------|-----|-----|-------|-------|-------|-------|
| Part II : Certification   | II. Health information  |                              |       |       |                              |                           |                              |     |     |       |       |       |       |
|   | <p>Declaration by the operator responsible for entry into the Union of the consignment of equine animal not intended for slaughter</p> <p>Identification of the animal(1)</p> <table border="0"> <tr> <td>Species<br/>(Scientific name)</td> <td>Identificat<br/>ion system</td> <td>Identificat<br/>ion<br/>number</td> <td>Age</td> <td>Sex</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table> |                              |       |       | Species<br>(Scientific name) | Identificat<br>ion system | Identificat<br>ion<br>number | Age | Sex | _____ | _____ | _____ | _____ |
| Species<br>(Scientific name)  | Identificat<br>ion system   | Identificat<br>ion<br>number | Age   | Sex   |                              |                           |                              |     |     |       |       |       |       |
| _____   | _____   | _____                        | _____ | _____ |                              |                           |                              |     |     |       |       |       |       |
| <p>I, the undersigned operator of the equine animal described above, hereby declare, that:</p> <ul style="list-style-type: none"> <li>- the equine animal <ul style="list-style-type: none"> <li>(2) either <input type="radio"/> [has remained in _____ (insert name of country, territory or zone thereof of dispatch) during a period of at least 40 days prior to the date of dispatch, or since birth, or since entry from the European Union or Norway;]</li> <li>(2) or <input type="radio"/> [entered _____ (insert name of country, territory or zone thereof of dispatch) during the required residence period of at least 40 days prior to the date of dispatch: <ul style="list-style-type: none"> <li>(a) on _____ (insert date) from _____ (insert name of country or territory from where the horse entered the country, territory or zone thereof of dispatch)</li> <li>(b) on _____ (insert date) from _____ (insert name of country or territory from where the horse entered the country, territory or zone thereof of dispatch)</li> <li>(c) on _____ (insert date) from _____ (insert name of country or territory from where the horse entered the country, territory or zone thereof of dispatch);]</li> </ul> </li> </ul> </li> <li>- during the period of 15 days prior to the date of departure the equine animal has not been in contact with animals suffering from infectious or contagious diseases transmissible to equine animals;</li> <li>- the conditions for residence and pre-export isolation as applicable in accordance with point II.3. of the accompanying health certificate for the country, territory or zone thereof of dispatch are fulfilled;</li> <li>- the conditions for the transport as applicable in accordance with point II.5. of the accompanying health certificate for the country or part of the territory of the country of dispatch are fulfilled;</li> <li>- I am aware of the animal health and veterinary certification requirements for the movement of equine animals from one EU Member State to another laid down in Commission Delegated Regulation (EU) 2020/688;</li> <li>- the equine animal is scheduled to leave the European Union on _____ (date) at the border post of _____ (insert name and place of border post of exit) or otherwise will be subject to the identification and registration rules applicable in accordance with Commission Delegated Regulation (EU) 2019/ 2035.</li> </ul> <p>Name and address of the operator: _____</p> <p>Date: _____ (dd/mm/yyyy)</p> <p>_____</p> <p>(Signature)</p> <p>(1) Identification system: The animal must be individually identified with one of the means of identification defined in point (a), (c), (e) or (g) of Annex III to Delegated Regulation (EU) 2019/2035, or be identified by an alternative method in accordance with Article 62 of that Regulation provided it is recorded in its identification document (passport). Specify the identification system (such as ear tag, tattoo, brand, transponder) and the anatomic place used on the animal.</p> |   |                              |       |       |                              |                           |                              |     |     |       |       |       |       |

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| Part II : Certification   | II. Health information   |                         |  |  |
|   | <p>If a passport accompanies the animal, its number should be stated and the name of the competent authority which validated it.</p> <p>Age: Date of birth (dd/mm/yyyy).</p> <p>Sex (M = male, F = female, C = castrated).</p> |                         |  |  |
|   | (2) Delete as appropriate.   |                         |  |  |
| Official veterinarian or Official inspector                                       |  |                         |  |  |
| Name (in capital letters)   |  | Qualification and title |  |  |
| Date of signature   |  | Signature               |  |  |
| Stamp   |  |                         |  |  |
| <p style="font-size: 48px; opacity: 0.3; transform: rotate(-30deg);">SPECIMEN</p> |  |                         |  |  |