Model animal health certificate for the non-commercial movement into a Member State from a territory or third country of dogs, cats or ferrets in accordance with Article 5(1) and (2) of Regulation (EU) No 576/2013

**COUNTRY: United States** Veterinary certificate to EU Consignor 1.2.a. I.2. Certificate reference No Name Address Central competent authority **USDA APHIS Veterinary Services** of dispatched consignment Tel. Local competent authority I.6. Person responsible for the consignment in the EU Consignee Name Address Postal code Tel. I.7. Country of ISO code I.8. Region of Country ISO I.10 Region of Code Code origin origin destination code destination **United States** Part I: Details I.12. Place of destination I.11. Place of origin I.13. Place of loading I.14. Date of departure I.15. Means of transport I.16. Entry BIP in EU I.17. No.(s) of CITES I.18. Description of commodity I.19. Commodity code (HS code) 010619 Dog Cat Ferret I.20. Quantity I.21. Temperature of products I.22. Total number <del>packages</del> I.23. Seal/Container No I.24. Type of packaging I.25. Commodities certified for: Pets  $\mathbf{X}$ I.26. For transit to 3rd Country I.27. For import or admission into EU 1.28. Identification of the commodities **Species** Identification Date of birth Colour Identification number Sex Breed (Scientific name) system [dd/mm/yyyy]

COUNTRY: United StatesNon-commercial movement into a Member State from a territory or third country of dogs, cats or ferrets in accordance with Article 5(1) and (2) of Regulation (EU) No 576/2013

| II.   | Health  | informat   | tion  | II.a.  | Certificat   | e referenc          | e No         | II.b.          |                         |  |  |
|---|---|--|---|--|--|---------------------|--------------|----------------|-------------------------|--|--|
|   |   |  |   |  |  |                     |              |                |                         |  |  |
| <u> </u>  | I, the undersigned official veterinarian <sup>1</sup> America (insert name of territory of    |  |   |  | //veterinarian authorised by the competent authority(1) ofthe United States of   |                     |              |                |                         |  |  |
| Purpose/nature of journey attested by the   |   |  |   | •  | • • •  |                     |              |                |                         |  |  |
| out the non-commercial more animals described in Box I.2 the owner to carry out the norm days of his movement and   |   | ial movement of<br>Box I.28 will act<br>the non-comm<br>nt and are not   | y the owner or the natural person who has authorisation in writing from the owner to carry vement of the animals on behalf of the owner, supported by evidence <sup>(3)</sup> , states that the 28 will accompany the owner or the natural person who has authorisation in writing from on-commercial movement of the animals on behalf of the owner within not more than five are not subject to a movement that aims at their sale or a transfer of ownership, and movement will remain under the responsibility of |  |  |                     |              |                |                         |  |  |
| <del>(1)</del> ,  | <sup>(1)</sup> either   |  | [the owner;]  |  |  |                     |              |                |                         |  |  |
| <del>(1)</del> ,  | 9 <b>r</b>  | [the natural person who has authorisation in writing from the owner to carry out the non-commercial movement of the                                  |   |  |  |                     |              |                |                         |  |  |
|   |   | animals on behalf of the owner;]   |   |  |  |                     |              |                |                         |  |  |
| (1)   |   | [the natural person designated by a carrier contracted by the owner to carry out the non-commercial movement of the animals on behalf of the owner;] |   |  |  |                     |              |                |                         |  |  |
| <sup>(1)</sup> either   | [11.2.  |  |   |  | moved in a number  |                     |              |                |                         |  |  |
| <sup>(1)</sup> Of   | <del>[II.2.</del>   | going to p   | articipate in   | competitions, c  | ex I.28 are moved in a number of more than five, are more than six months old and are etitions, exhibitions or sporting events or in training for those events, and the owner or the point II.1 has provided evidence <sup>(3)</sup> that the animals are registered |                     |              |                |                         |  |  |
|   | either  | [to attend   | such event;   | }  |  |                     |              |                |                         |  |  |
| <del>(1)</del> ,  | <del>or</del>   | <del>[with an a</del>  | ssociation o  | rganising such   | events;]   |                     |              |                |                         |  |  |
|   | Attestation   |  |   |  | ody titration test:  |                     |              |                |                         |  |  |
| (1) either  | be<br>sir<br>red  |  | the animals described in Box I.28 are less than 12 weeks old and have not received an anti-rabies vaccination, or are between 12 and 16 weeks old and have received an anti-rabies vaccination, but 21 days at least have not elapsed since the completion of the primary vaccination against rabies carried out in accordance with the validity requirements set out in Annex III to Regulation (EU) No 576/2013 <sup>(4)</sup> , and  |  |  |                     |              |                |                         |  |  |
|   |   |  | II.3.1 the territory or third country of provenance of the animals indicated in Box I.1 is listed in Annex II to Implementing Regulation (EU) No 577/2013 and the Member State of destination indicated in Box I.5 has informed the public that it authorises the movement of such animals into its territory, and they are accompanied by  |  |  |                     |              |                |                         |  |  |
| (1)   | <sup>(1)</sup> either   |  | until the ti  | ached declaration <sup>(5)</sup> of the owner or the natural person referred to in point II.1 stating that from birth e time of the non-commercial movement the animals have had no contact with wild animals of a susceptible to rabies;  |  |                     |              |                |                         |  |  |
| <del>(1)</del> ,  | <sup>(1)</sup> <del>O</del> r   |  | their mother, on whom they still depend, and it can be established that the mother received before their birth an anti-rabies vaccination which complied with the validity requirements set out in Annex III to Regulation (EU) No 576/2013;]]  |  |  |                     |              |                |                         |  |  |
| the animals described in Bodays have elapsed since the validity requirements set of   |   | nce the comple<br>set out in Anne  | etion of the primary  | ranti-rabies v   | accination <sup>(4)</sup> car<br>5/2013 and any  | ried out in accorda | nce with the |                |                         |  |  |
|   | (1) either [H.3.1 the animals de<br>Implementing Re<br>Annex II to Imple<br>those listed in A |  | als described i<br>ting Regulation<br>o Implementing<br>ed in Annex II t<br>1) of Regulatio   | escribed in Box 1.28 come from a territory or a third country listed in Annex II to Regulation (EU) No 577/2013, either directly, through a territory or a third country listed in lementing Regulation (EU) No 577/2013 or through a territory or a third country other than Annex II to Implementing Regulation (EU) No 577/2013 in accordance with point (e) of Regulation (EU) No 576/2013 <sup>(7)</sup> , and the details of the current anti-rabies vaccination are |  |                     |              |                |                         |  |  |
| the animals described in Box I.28 come from, or are scheduled to transit thre country other than those listed in Annex II to Implementing Regulation (EU) No antibody titration test <sup>(8)</sup> , carried out on a blood sample taken by the veterina competent authority on the date indicated in the table below not less than 30 d vaccination and at least three months prior to the date of issue of this certificate, equal to or greater than 0.5 IU/ml <sup>(9)</sup> and any subsequent revaccination was carried validity of the preceding vaccination <sup>(6)</sup> , and the details of the current anti-rabies v of sampling for testing the immune response are provided in the table below: |   |  |   | EU) No 577/2013 c<br>veterinarian author<br>an 30 days after th<br>tificate, proved an a<br>s carried out within t<br>rabies vaccination a   | and a rabies<br>ised by the<br>e preceding<br>antibody titre<br>the period of  |                     |              |                |                         |  |  |
| Т   | ransponder  | or tattoo  |   |  |  |                     | Validity o   | f vaccination  |                         |  |  |
|   | numeric   | Date   |   | Date of  | Name and   | Batch               | validity 0   | . rassillation | Date of<br>the<br>blood |  |  |

| Transponder                           | or tattoo  |  |  |                 | Validity of          |                   |   |
|---------------------------------------|--|--|--|-----------------|----------------------|-------------------|---|
| Alphanumeric<br>code of the<br>animal | Date of<br>implantation<br>and/or<br>reading <sup>(10)</sup><br>[dd/mm/yyyy] | Date of<br>vaccination<br>[dd/mm/yyyy] | Name and<br>manufacturer of<br>vaccine | Batch<br>number | From<br>[dd/mm/yyyy] | To<br>[dd/mm/yyy] | Date of<br>the<br>blood<br>sampling<br>[dd/mm/<br>yyyy] |
|                                       |  |  |  |                 |                      |                   |   |
|                                       |  |  |  |                 |                      |                   |   |
|                                       |  |  |  |                 |                      |                   |   |
|                                       |  |  |  |                 |                      |                   |   |
|                                       |  |  |  |                 |                      |                   |   |

2016/561

#### COUNTRY: United StatesNon-commercial movement into a Member State from a territory or third country of dogs, cats or ferrets in accordance with Article 5(1) and (2) of Regulation (EU) No 576/2013

| II.                      | Health information                      |  | II.a.                          | Certificate reference No           | II.b.                           |              |  |
|--------------------------|---|--|--------------------------------|------------------------------------|---------------------------------|--------------|--|
|                          |   |  |                                |                                    |                                 |              |  |
|                          | r                                       |  |                                |                                    |                                 |              |  |
|                          | Attestation of anti-parasite treatment: |  |                                |                                    |                                 |              |  |
| <sup>(1)</sup> either    | <del>[II.4.</del>                       | the dogs described in Box I.28 are destined for a Member State listed in Annex I to Commission Deleg           |                                |                                    |                                 |              |  |
|                          |   | Regulation (EU) No 1152/2011 and have been treated against Echinococcus multilocularis, and the details of the |                                |                                    |                                 |              |  |
|                          |   | treatment carried out by the administering veterinarian in accordance with Article 7 of Commission Delegated   |                                |                                    |                                 |              |  |
|                          |   | Regulation (EU) No 1152/20   | 911 <sup>(11)(12)(13)</sup> ar | e provided in the table below.]    |                                 |              |  |
| <sup>(1)</sup> <b>or</b> | <del>[II.4.</del>                       | the dogs described in Box I.   | 28 have not b                  | een treated against Echinococcus m | ultilocularis <sup>(11)</sup> . | <del>]</del> |  |
|                          |   |  |                                |                                    |                                 |              |  |

| Transponder or           |                                      | chinococcus<br>eatment                          | Administering veterinarian            |  |
|--------------------------|--------------------------------------|---|---------------------------------------|--|
| tattoo number 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 |  |
|                          |                                      |   |                                       |  |
|                          |                                      |   |                                       |  |
|                          |                                      |   |                                       |  |
|                          | _                                    |   |                                       |  |
|                          |                                      |   |                                       |  |

#### Notes

- This certificate is meant for dogs (Canis lupus familiaris), cats (Felis silvestris catus) and ferrets (Mustela putorius furo). (a)
- This certificate is valid for 10 days from the date of issue by the official veterinarian until the date of the documentary and (b) checks at the designated Union travellers' point of entry (available http://ec.europa.eu/food/animal/liveanimals/pets/pointsentry\_en.htm).

In the case of transport by sea, that period of 10 days is extended by an additional period corresponding to the duration of the

For the purpose of further movement into other Member States, this certificate is valid from the date of the documentary and identity checks for a total of four months or until the date of expiry of the validity of the anti-rabies vaccination or until the conditions relating to animals less than 16 weeks old referred to in point II.3 cease to apply, whichever date is earlier. Please note that certain Member States have informed that the movement into their territory of animals less than 16 weeks old 11.3 not authorised. referred to point is You may wish to inquire http://ec.europa.eu/food/animal/liveanimals/pets/index\_en.htm.

#### Part I:

Box I.5: Consignee: indicate Member State of first destination.

Box I.28: Identification system: select of the following: transponder or tattoo.

*Identification number.* indicate the transponder or tattoo alphanumeric code.

Date of birth/breed: as stated by the owner.

#### Part II:

(2)

(3)

(4)

(5)

(7)

Keep as appropriate.

The declaration referred to in point II.1 shall be attached to the certificate and comply with the model and additional requirements set out in Part 3 of Annex IV to Implementing Regulation (EU) No 577/2013.

The evidence referred to in point II.1 (e.g. boarding pass, flight ticket) and in point II. 2 (e.g. receipt of entry to the event, proof of membership) shall be surrendered on request by the competent authorities responsible for the checks referred to in point (b) of the Notes.

Any revaccination must be considered a primary vaccination if it was not carried out within the period of validity of a previous

The declaration referred to in point II.3.2 to be attached to the certificate complies with the format, layout and language requirements laid down in Parts 1 and 3 of Annex I to Implementing Regulation (EU) No 577/2013.

A certified copy of the identification and vaccination details of the animals concerned shall be attached to the certificate.

The third option is subject to the condition that the owner or the natural person referred to in point II.1 provides, on request by the competent authorities responsible for the checks referred to in point (b), a declaration stating that the animals have had no contact with animals of species susceptible of rabies and remain secure within the means of transport or the perimeter of an international airport during the transit through a territory or a third country other than those listed in Annex II to Implementing Regulation (EU) No 577/2013. This declaration shall comply with the format, layout and language requirements set out in Parts 2 and 3 of Annex I to Implementing Regulation (EU) No 577/2013.

(8) 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 three 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

 $\underline{http://ec.europa.eu/food/animal/liveanimals/pets/approval en.htm});$ 

# COUNTRY: United StatesNon-commercial movement into a Member State from a territory or third country of dogs, cats or ferrets in accordance with Article 5(1) and (2) of Regulation (EU) No 576/2013

| II.   | Health information   | II.a.        | Certificate reference No  | II.b.      |  |  |  |
|---|--|--------------|---|------------|--|--|--|
|   |  |              |   |            |  |  |  |
|   | <ul> <li>does not have to be renewed on an animal, which following that test with satisfactory results, has been revaccinated<br/>against rabies within the period of validity of a previous vaccination.</li> </ul>   |              |   |            |  |  |  |
|   | A certified copy of the official report from the approved laboratory on the results of the rabies antibody test referred to in point II.3.1 shall be attached to the certificate.  |              |   |            |  |  |  |
| (9)   | By certifying this result, the official veterinarian confirms that he has verified, to the best of his ability and where necessary w contacts with the laboratory indicated in the report, the authenticity of the laboratory report on the results of the antibot titration test referred to in point II.3.1.                           |              |   |            |  |  |  |
| (10)  | In conjunction with footnote (6), the marking of the animals concerned by the implantation of a transponder or by a clearly readable tattoo applied before 3 July 2011 must be verified before any entry is made in this certificate and must always precede any vaccination, or where applicable, testing carried out on those animals. |              |   |            |  |  |  |
| (11)  | The treatment against Echinococcus   |              | •   |            |  |  |  |
|   |  |              | eriod of not more than 120 hours and not less<br>the Member States or parts thereof listed in                         |            |  |  |  |
|   |  | ombination,  | hich contains the appropriate dose of praziqu,<br>have been proven to reduce the burden of<br>lost species concerned. |            |  |  |  |
| (12)  |  | he schedul   | o document the details of a further treatment<br>ed entry into one of the Member States or                            |            |  |  |  |
| (13)  |  |              | ed to document the details of treatments if movement into other Member States describe                                |            |  |  |  |
| Officia   | al veterinarian/Authorised veterinarian  |              |   |            |  |  |  |
|   | Name (in capital letters):   |              | Qualification   | and title: |  |  |  |
|   | Address  |              |   |            |  |  |  |
|   | Telephone:   |              |   |            |  |  |  |
|   | Date:  |              |   | Signature: |  |  |  |
|   | Stamp:   |              |   |            |  |  |  |
|   |  |              |   |            |  |  |  |
| Endor   | rsement by the competent authority (not nece   | ssary when   | the certificate is signed by an official veterina   | arian)     |  |  |  |
|   | Name (in capital letters):   |              | Qualification   | and title: |  |  |  |
|   | Address  |              |   |            |  |  |  |
|   | Telephone:   |              |   |            |  |  |  |
|   | Date:  |              |   |            |  |  |  |
|   | Stamp:   |              |   |            |  |  |  |
| Official at the travellers' point of entry (for the purpose of further movement into other Member States) |  |              |   |            |  |  |  |
|   | Name (in capital letters):   |              | Title:  |            |  |  |  |
|   | Address  |              |   |            |  |  |  |
|   | Telephone:   |              |   |            |  |  |  |
|   | E-mail address:  |              |   |            |  |  |  |
|   | Date of completion of the documentary and  | identity che | ecks: Signature:  | Stamp:     |  |  |  |

## **Declaration**

| I, the u           | indersigned  |   |               |
|--------------------|--|---|---------------|
| [own               | er or the natural person who has authorisation in writing                    | from the owner to carry out the non-commercial movement or $\operatorname{owner}^{(I)}$   | behalf of the |
| owners<br>owner    | ship and will accompany the owner or the                                     | abject to a movement that aims at their sale or e natural person who has authorisation in writent on behalf of the owner <sup>(1)</sup> within not more the | ing from the  |
| Tr                 | ansponder/tattoo <sup>(1)</sup> alphanumeric code                            | Animal health certificate number  |               |
|                    |  |   |               |
|                    |  |   |               |
|                    |  |   |               |
|                    |  |   |               |
|                    |  |   |               |
| Durino             | the non-commercial movement, the above                                       | e animals will remain under the responsibility of   | .f            |
| _                  | r [the owner];   | e animals will remain under the responsibility e  | <b>,</b> 1    |
| <sup>(1)</sup> 01° | 1,   | nation in writing from the owner to carry o   | out the non-  |
| <sup>(1)</sup> or  | [the natural person designated by the ca                                     | nrrier contracted to carry out the non-commerci(insert name of the carrier)]  | al movement   |
|                    | Place and date:  |   |               |
|                    | Signature of the owner or natural perso out the non-commercial movement on b | on who has authorisation in writing from the overhalf of the owner <sup>(<math>I</math>)</sup> :  | wner to carry |
| (1)                | delete as appropriate.   |   |               |

## ANNEX I

### Part 1

## Format and layout of the declaration referred to in point (a) of Article 7(2) and of Article 11(2) of Regulation (EU) No 576/2013

## **DECLARATION**

| I, the undersigned  | (1)   |
|---|---|
|   | riting from the owner to carry out the non-commercial movement of als on behalf of the owner $^{(2)}$ ] |
| declare that from birth until the time of the r<br>have had no contact with wild animals of spe | non-commercial movement the following pet animals ecies susceptible to rabies:                          |
| Transponder/tattoo <sup>(2)</sup> alphanumeric code <sup>(2)</sup>                              | Passport/Animal health certificate <sup>(2)</sup> number <sup>(2)</sup>                                 |
|   |   |
|   |   |
|   |   |
|   |   |
| Place and date:   |   |
| Signature:  |   |
|   |   |
| <ul><li>(1) to be completed in block letters.</li><li>(2) delete as appropriate.</li></ul>      |   |

Page \_\_\_\_ of \_\_\_\_