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**OMB Approved**  
0579-0328  
**EXP. 4/30/2023**

This certificate is authorized by law (21 U.S.C. 112). While you are not required to respond, no health certificate can be validated unless the data required are provided.

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE  
VETERINARY SERVICES

1. DATE OF SHIPMENT

No.

**CERTIFICATE FOR POULTRY OR HATCHING EGGS FOR EXPORT**

2. NAME AND ADDRESS OF EXPORTER (include ZIP Code)

3. NAME AND ADDRESS OF IMPORTER

FIPS STATE CODE (for USDA use only)

FIPS COUNTRY CODE (for USDA use only)

| 4. QUANTITY/UNIT<br>(Eggs-Dozen)<br>(Poultry-Number) | 5. VARIETY, STRAIN, OR<br>TRADE NAME | 6. PRODUCT<br>("X" or check) |             |        |        |       | 7. SEX<br>("X" or check) |         |       | 8. TYPE (intended use) ("X" or check) |           |       |                           |           |       |                        |           |       | 9. NPIP APPROVAL NUMBER | 10. NPIP CLASSIFICATION-U.S.<br>("X" or check) |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--------------------------------------|------------------------------|-------------|--------|--------|-------|--------------------------|---------|-------|---------------------------------------|-----------|-------|---------------------------|-----------|-------|------------------------|-----------|-------|-------------------------|--|------------------------|-------------------|----------------------|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|
|  |                                      | Chicken Eggs                 | Turkey Eggs | Chicks | Poults | Other | Straight-run             | Females | Males | Commercial Production Stock           |           |       | Multiplier Breeding Stock |           |       | Primary Breeding Stock |           |       |                         | Pullorum-Typhoid Clean M.                      | Gallisepticum Clean M. | Meleagridis Clean | Sanitation Monitored | Other (specify) |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       | Eggs-Type                             | Meat-Type | Other | Eggs-Type                 | Meat-Type | Other | Eggs-Type              | Meat-Type | Other |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                                      |                              |             |        |        |       |                          |         |       |                                       |           |       |                           |           |       |                        |           |       |                         |  |                        |                   |                      |                 |  |  |  |  |  |  |  |  |  |  |  |  |

11. TOTAL NUMBER OF UNITS CERTIFIED FOR EXPORT

12. CHECK APPROPRIATE CERTIFICATION BELOW (A OR B)

- A. Certificate for Hatching Eggs and Newly Hatched Poultry, which have not been fed or watered. This is to certify that: (1) the flock or flocks and the hatchery or hatcheries from which the above-described hatching eggs or newly hatched poultry originated were inspected by me or another accredited veterinarian within 30 days prior to shipment of above hatching eggs or setting of eggs for above shipment of day old chicks and found free from evidence of communicable diseases and insofar as can be determined have not been exposed to Newcastle disease, fowl plague, fowl typhoid, ornithosis, and pullorum disease; (2) during the usual routine inspection of the flock or flocks there was no visible evidence of communicable diseases observed on the inspection dates listed in item 13 below; (3) the National Poultry Improvement Plan classification is as indicated in item 9 above, and (4) the prospective exporter has been advised that the hatching eggs must be clean and that the shipment must be made in new, clean containers.
- B. Certificate for Poultry other than Newly Hatched Poultry Specified in Certificate A. This is to certify that: (1) on this date all poultry shown in item 5 above, including all other poultry maintained in the flock, were inspected by me on the premises of origin within the past 30 days and found free from evidence of infectious and contagious diseases and insofar as can be determined have not been exposed to Newcastle disease, fowl plague, fowl typhoid, ornithosis and pullorum disease; and (2) the prospective exporter has been advised that shipment must be made in new containers or clean containers which have been properly cleaned and disinfected.

13. REMARKS OR ADDITIONAL INFORMATION (if needed)

|                                    |  |  |                                   |
|------------------------------------|--|--|-----------------------------------|
| USDA VETERINARY SEAL (if required) | 14. TYPED NAME OF ISSUING VETERINARIAN   |  |                                   |
|                                    | 15. SIGNATURE OF ISSUING VETERINARIAN  |  |                                   |
|                                    | 16. STATUS<br><input type="checkbox"/> 1. State <input type="checkbox"/> 2. Federal <input type="checkbox"/> 3. Accredited |  |                                   |
|                                    | 18. SIGNATURE OF ENDORSING FEDERAL VETERINARIAN (if required)  |  | 17. DATE ISSUED<br>MO    DA    YR |
|                                    | 19. DATE ENDORSED<br>MO    DA    YR  |  |                                   |

## CODES

## FIPS STATE CODES

|                           |                    |                     |                     |
|---------------------------|--------------------|---------------------|---------------------|
| 01 – Alabama              | 18 – Indiana       | 31 – Nebraska       | 44 – Rhode Island   |
| 02 – Alaska               | 19 – Iowa          | 32 – Nevada         | 45 – South Carolina |
| 04 – Arizona              | 20 – Kansas        | 33 – New Hampshire  | 46 – South Dakota   |
| 05 – Arkansas             | 21 – Kentucky      | 34 – New Jersey     | 47 – Tennessee      |
| 06 – California           | 22 – Louisiana     | 35 – New Mexico     | 48 – Texas          |
| 08 – Colorado             | 23 – Maine         | 36 – New York       | 49 – Utah           |
| 09 – Connecticut          | 24 – Maryland      | 37 – North Carolina | 50 – Vermont        |
| 10 – Delaware             | 25 – Massachusetts | 38 – North Dakota   | 51 – Virginia       |
| 11 – District of Columbia | 26 – Michigan      | 39 – Ohio           | 52 – Virgin Island  |
| 12 – Florida              | 27 – Minnesota     | 40 – Oklahoma       | 53 – Washington     |
| 13 – Georgia              | 28 – Mississippi   | 41 – Oregon         | 54 – West Virginia  |
| 15 – Hawaii               | 29 – Missouri      | 42 – Pennsylvania   | 55 – Wisconsin      |
| 16 – Idaho                | 30 – Montana       | 43 – Puerto Rico    | 56 – Wyoming        |
| 17 – Illinois             |                    |                     |                     |