

Republic of Namibia
MINISTRY OF AGRICULTURE, WATER AND FORESTRY

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DIRECTORATE OF VETERINARY SERVICES
PRIVATE BAG 12022
WINDHOEK
NAMIBIA
Ref. no.: V 13/1/3/2/ 12
Expiry date:

Permit no.: H
Date of Issue:

**VETERINARY IMPORT PERMIT FOR HORSE SEMEN FROM THE UNITED STATES OF AMERICA
INTO THE REPUBLIC OF NAMIBIA.**

(Issued in terms of the Animal Health Act no 01 of 2011)

Authority is hereby granted to:

Name:

Farm name and Number (final destination):..... District :.....

Address:

Telephone number in Namibia:

for the importation of: straws of horse semen

into Namibia from THE UNITED STATES OF AMERICA (Country of origin)

through **HOSEA KUTAKO INTERNATIONAL AIRPORT** (port of entry)

Subject to the following conditions:

1. **The importer accepts the sole responsibility of ensuring that the conditions below have been complied with and understands his responsibility in this regard.**
2. The consignment must be accompanied by **ORIGINAL** this permit as well as copies of results of **laboratory tests**.
3. The **ORIGINAL** health certificate overleaf, consisting of **Two pages** must be completed in English and signed by an authorised veterinarian who must also **inform the state veterinarian at destination of the dispatch of the semen by means of a fax. Alternatively an ORIGINAL health certificate on official letterhead of the exporting country issued by the certifying official veterinarian must be attached to this import permit. The health certificate must contain the Namibian veterinary import permit number and all the information as on the Namibian health certificate.**
4. The consignment must be clearly identified, adequately securely and hygienically packed.
5. The arrival of the consignment must be reported to the State Veterinarian, **WINDHOEK, Telephone 061 276 580 fax: 061 276 582** immediately and the consignment **may not be released from Customs** without his/her authorization.
6. After arrival in Namibia, the consignment will be kept under supervision of the state veterinarian until samples of the semen have been tested for **Equine viral arteritis (EVA)** at an approved laboratory. All tests will be at the importers cost. The consignment will only be released if the results of the tests are negative. Two mares will be test-bred with semen and the mares must remain sero-negative to EVA tests done on serum collected on the day of insemination and at 21 days after insemination. In the case of sero-positive results, no further use of the semen will be allowed.
7. The mares which have been inseminated with the imported semen may not be moved from the property for a period of at least 30 days after the insemination. Any illness or deaths of horses during the period of restriction must immediately be reported to the state veterinarian of the area.
8. The importer undertakes to keep accurate records of all mares inseminated with the imported semen which must be presented to the Director of Veterinary Services on request.
9. The containers and receptacle in which the semen is transported, as well as the insemination apparatus used, must be disinfected to the satisfaction of the State veterinarian concerned.
10. This permit is valid is for one consignment only and may not be used after the expiry date indicated.

Signed:

DIRECTOR OF VETERINARY SERVICES

The importation of livestock is subject to Livestock Improvement and/or Meat Board Permits

(3 Eq semen USA 05/14)

**VETERINARY HEALTH CERTIFICATE FOR THE IMPORTATION OF HORSE SEMEN FROM
THE UNITED STATES OF AMERICA INTO NAMIBIA.**

Namibian Permit Number

Ref Number

Issuing Authority :

Country of Origin: UNITED STATES OF AMERICA

A. Description

1. Description of donor and semen

Identification of donor	Breed	Date of collection	No of straws (doses)	Description of straw (colour or markings)	Capacity of straws

2.0 Origin of semen

2.1 Name and address of exporter:

Telephone Number Fax Number

2.2 Details of approved artificial insemination centre

Name Registration No

Address

3.0 Destination of animals

3.1 Name and address of consignee

.....

Telephone Number Fax Number

3.2 Physical address at destination

Farm Name and number

District ;

4. Means of transportation (air, road, rail)

4.1 Description of transport vehicle (flight number, Registration number)

.....

B HEALTH ATTESTATION

I, the undersigned veterinarian authorised thereto by the official veterinary authority of **THE UNITED STATES OF AMERICA** (name of country) , certify that:

1. The centre at which the horse semen described in section A was collected:

- 1.1 Is under the control and supervision of a veterinarian authorised by the official veterinary authority;
- 1.2 Is situated in a region or State which was, on the day of semen collection until the 30 days mandatory storage period post-collection for the frozen semen has lapsed, was free of African Horse Sickness, Vesicular Stomatitis, Venezuelan and Japanese Equine Encephalomyelitis, Glanders and Dourine;
- 1.3 Contained only equidae which were free of clinical signs of Equine viral arteritis (EVA) and Contagious Equine Metritis for a period of 30 days prior to semen collection until the 30 days mandatory storage period has lapsed;
- 1.4 No equidae showed clinical signs of an infectious or contagious disease for a period of at least **30 days** prior to and during collection of the semen;

2 The donor stallion(s):

- 2.1 Was/ Were kept on site at the approved Artificial Insemination Centre for a period of at least **30 days** prior to collection of the semen and that during that time was not used for natural mating;
- 2.2 Was not in contact with equidae suffering from infectious or contagious disease for a period of at least **30 days** prior to and during collection of the semen;
- 2.3 Have been in the exporting country since birth or for a continuous period of at least **60 days** prior to collection of the semen;
- 2.4 Originate from premises which have been free from outbreaks of Equine Infectious Anaemia, Equine Encephalomyelitis, Borna disease, Contagious Equine Metritis and Surra for at least **12 months** and in the case of Contagious Equine Metritis since the beginning of the last breeding season;
- 2.5 Were examined by an authorised veterinarian on the day of semen collection and found to be clinically healthy and free from communicable diseases to which the species is susceptible;
- 2.6 The country is officially free from Dourine and Glanders.
- 2.7 Were tested with negative results for **Equine Infectious Anaemia** using the agar gel immuno-diffusion (Coggin's) test during the storage period and not less than 14 days after the last collection;
- 2.8 Swabs were collected from the sheath, urethra, and urethral fossa as well as a sample of pre-ejaculatory fluid or a semen sample and tested on **two occasions** for **Contagious Equine Metritis** (CEM) at intervals of not less than 7 days, with negative results in each case, during the 30 day mandatory storage period and not less than 14 days after the last collection and prior to leaving the artificial insemination centre. (No antimicrobial treatment within 7 days of swabbing and no disinfectant washing prior to swabbing)
- 2.9 Were subjected to a serum neutralisation test for equine viral arteritis with negative results at a dilution of 1 in 4 on a blood sample collected during the 30 day mandatory storage period of the semen and not less than 14 days after the last semen collection and prior to the animal leaving the artificial insemination centre.
(Proof of negative serology should be attached to the health certificate)
OR
 Were subjected to a serum neutralisation test for Equine Viral Arteritis with negative results at a dilution of 1 in 4 on a blood sample collected prior to vaccination and then immediately vaccinated for EVA and regularly revaccinated at regular intervals in accordance with the vaccine manufacturer's recommendations.
(Proof of negative serology should be attached to the health certificate)

3 The consignment was adequately, securely and hygienically packed in clean containers, and the containers and seal number / marks are:

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(3 Eq semen USA 05/14)

4. Summary of laboratory test results: Copies to be attached

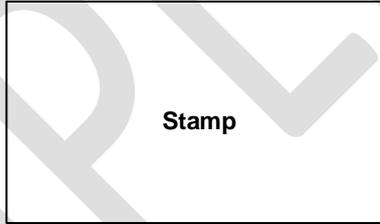
Disease	Date	Type of Test	Results	Name of Official Laboratory
<i>Glanders</i>	-----US Officially Free- No testing required-----			
<i>Dourine</i>	-----US Officially Free- No testing required-----			
<i>Equine infectious anaemia</i> (Described in 2.7 above)				
<i>Contagious equine metritis</i> (Described in 2.8 above)				
<i>Equine viral arteritis</i> (Described in 2.9 above)				

5. Done at Date

Signature
VETERINARIAN AUTHORIZED BY THE BY THE OFFICIAL VETERINARY AUTHORITY

Name in print:

Signature
OFFICIAL VETERINARY AUTHORITY



Name in print:

Address:

SAMPLE