

**SANITARY CERTIFICATE FOR DAIRY PRODUCTS (OTHER THAN CHEESE AND BUTTER),
OF OVINE/CAPRINE ORIGIN FROM APPROVED COUNTRIES**

Exporting country: United States of America

Ministry of: USDA/APHIS/VS

Province, district, etc.:

I. Identification of consignment

Name and address of manufacturing establishment:

Registration Number of manufacturing establishment:

Type of product:

Type of package:

II. Origin of the milk contained in the dairy product to which this certification applies

Country/Countries of origin of the milk or milk from which this dairy product is made:

Country/Countries of packaging of the milk or milk from which this dairy product is made:

III. Destination of the dairy product

Shipping Establishment:

Importing Establishment:

Nature and identification of means of transport:

Name and address of exporter:

Name and address of consignee:

IV. Attestation of Animal Health

Note: It is essential that either Part A or Part B be signed by the *Official Veterinarian*. An endorsed manufacturer's statement must be attached.

A. Product not heat treated.

The undersigned *Official Veterinarian* certifies that:

- (i) The United States is a country recognized by the Office International des Epizooties (OIE) as free of foot and mouth disease (without vaccination).
- (ii) The country/countries listed in section II above are recognized by the Office International des Epizooties (OIE) as foot and mouth disease-free (without vaccination).
- (iii) The country/countries listed in section II above meet OIE requirements for freedom from sheep pox and goat pox.
- (iv) The animals were clinically healthy at the time the milk was obtained.
- (v) The country/countries listed in section II above meet OIE requirements for freedom from: peste des petits ruminants, ovine brucellosis, contagious agalactia, and [for caprine products only] contagious caprine pleuropneumonia, and are free from maedi-visna.
- (vi) I have read and endorsed the attached manufacturer's statement and have no reason to doubt the truth of the statement.
- (vii) The packaging or immediate container(s) indicate the date of product manufacturing.
- (viii) The facility is inspected and approved by the government for the manufacturing and export of dairy products including colostrum (*this statement only required for colostrum products*)

Name and address of Veterinarian:

Signature _____ *Date:* _____

Official Stamp:

Note: Product carrying Attestation Part A (product not heat treated) must be accompanied by a manufacturer's certificate [that must include verification of Treatments (a) or (b) in section IV] of the attached format.

B. Product heat treated.

The undersigned *Official Veterinarian* certifies that:

- (i) The United States is a country recognized by the Office International des Epizooties (OIE) as free of foot and mouth disease (without vaccination).
- (ii) The country/countries listed in section II above are recognized by the Office International des Epizooties (OIE) as foot and mouth disease-free (without vaccination).
- (iii) The country/countries listed in section II above meet OIE requirements for freedom from sheep pox and goat pox.
- (iv) The animals were clinically healthy at the time the milk was obtained.
- (v) I have read and endorsed the attached manufacturer's statement and have no reason to doubt the truth of the statement.
- (vi) The packaging or immediate container(s) indicate the date of product manufacturing.
- (vii) The facility is inspected and approved by the government for the manufacturing and export of dairy products including colostrum (*this statement only required for colostrum products*)

Name and address of Veterinarian:

Signature _____ *Date:* _____

Official Stamp:

Note: Product carrying Attestation Part B (product heat treated) must be accompanied by a manufacturer's certificate [that must include verification of Treatments (a) or (b) in section IV] of the attached format.

III. Statements

- A. The milk or the milk from which the dairy product was made was heated to one of the following minimum temperature/times: [Select one]

EITHER

_____ (a) 72°C for a minimum of 15 seconds, or the equivalent in terms of phosphatase destruction; or 135°C for a minimum of 1 second.

OR

_____ (b) The milk from which the dairy product was made was not heat treated as above.

Signed: _____ Date: _____

Name and address of Company employee:

Position within Company: _____

[Note: The Official Seal or Trademark of the Manufacturing Company must appear on each page of the Manufacturer's Certificate.]

Company seal or trademark:

Name and address of Veterinarian

Signature _____ Date: _____

Official Stamp: