

Health Certificate No. _____
(Valid only if the USDA Veterinary
Seal Appears Over the Certificate No.)

5.3 Model sanitary certificates to accompany dairy products exported to Australia

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

Exporting Country: _____

Ministry of: _____

Province, district, etc.: _____

I. Identification of consignment

Name and address of manufacturing establishment:

Registration number of manufacturing establishment: _____

Type of Product: _____

Type of Package: _____

Number of Packages: _____

Net Weight: _____

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

The milk or the milk from which this dairy product is made originated in:

(Country/zone)

The milk or the dairy product was processed and packaged in:

(Country/zone)

III. Destination of the dairy product

The dairy product is being sent from: _____

Health Certificate No. _____
 (Valid only if the USDA Veterinary
 Seal Appears Over the Certificate No.)

The dairy product is being sent to: _____

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 milk or the milk from which the dairy product was made originated from a country/zone recognized by the Office International des Epizooties (OIE) as foot and mouth disease-free (with or without vaccination).
- (ii) The milk or the milk from which the dairy product was made originated from a country/zone which meets OIE requirements for freedom from lumpy skin disease, and which is free from buffalo pox.
- (iii) The animals were clinically healthy at the time the milk was obtained.
- (iv) The products were processed in a foot and mouth disease free country/zone.
- (v) The milk or the milk from which the dairy product was made originated from a country/zone which meets OIE requirements for freedom from:

rinderpest (Code Article 2.1.4.2),
 bovine brucellosis (Code Article 3.2.1.1),
 bovine tuberculosis (Code Article 3.2.3.1) and
 which is free from Jembrana.

Health Certificate No. _____

(Valid only if the USDA Veterinary
Seal Appears Over the Certificate No.)

- (vi) I have read and endorsed the attached manufacturer's statement and have no reason to doubt the truth of the statement.
- (vii) The package or immediate container of products was stamped with the date of manufacture.

Issued at _____, on _____

Name and address of Veterinarian

Official Stamp

Signature _____

Note: Product carrying Attestation Part A must be accompanied by a manufacturer's certificate that must include either *III Treatment (a) or (b)* of the attached format:

B. Product heat treated.

The undersigned *Official Veterinarian* certifies that:

- (i). The milk or the milk from which the dairy product was made originated from a country/zone recognized by the Office International des Epizooties (OIE) as foot and mouth disease-free (with or without vaccination).
- (ii). The milk or the milk from which the dairy product was made originated from a country/zone which meets OIE requirements for freedom from lumpy skin disease, and which is free from buffalo pox.
- (iii). The animals were clinically healthy at the time the milk was obtained.
- (iv). The products were processed in a foot and mouth disease free country/zone.
- (v). I have read and endorsed the attached manufacturer's statement and have no reason to doubt the truth of the statement.
- (vi). The package or immediate container of products was stamped with the date of manufacture.

Issued at _____, on _____

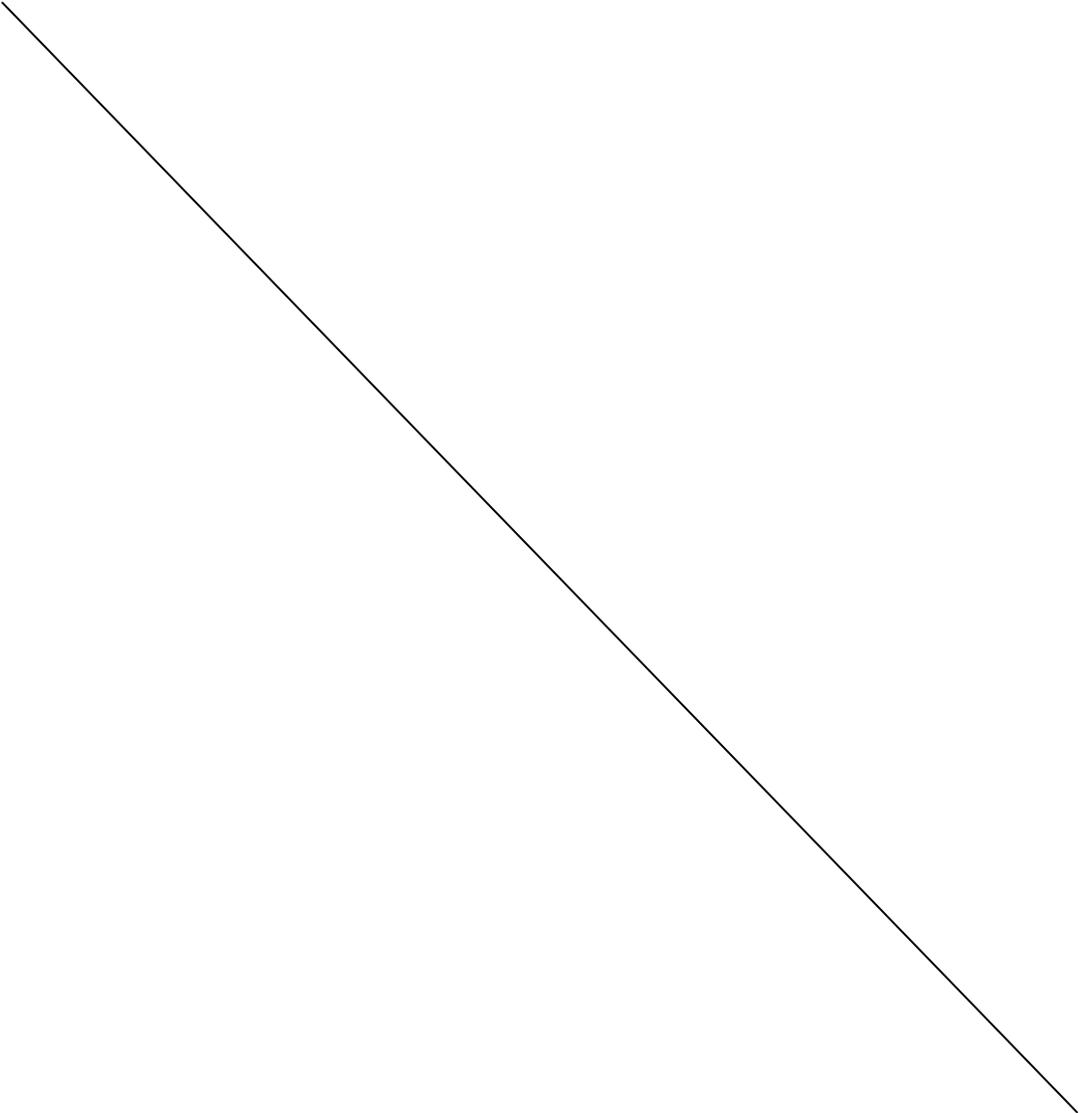
Health Certificate No. _____
(Valid only if the USDA Veterinary
Seal Appears Over the Certificate No.)

Name and address of Veterinarian

Official Stamp

Signature _____

Note: Product carrying Attestation Part B must be accompanied by a manufacturer's certificate that includes the heat treatment described in *III Treatments (a)* of the attached format:



Health Certificate No. _____
(Valid only if the USDA Veterinary
Seal Appears Over the Certificate No.)

MANUFACTURER’S CERTIFICATE for dairy products (other than cheese and butter) of bovine origin from approved countries.

I. Manufacturer details

Name and address of manufacturing establishment:

Registration of manufacturing establishment: _____

II. Product

Description of product: _____

Origin of raw materials: _____

Date of manufacture as appears on the packaging or immediate container of the product:

III. Treatments*

EITHER

The milk or the milk from which the dairy product was made was heated to one of the following minimum temperature/times:

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

The milk or the milk from which the dairy product was made was not heat treated as above.

*(Check the appropriate box)

Signed _____

Date _____

Position within the Company _____

Health Certificate No. _____
(Valid only if the USDA Veterinary
Seal Appears Over the Certificate No.)

Name and address of Company employee:

[**Note:** The Official Seal or Trademark of the Manufacturing Company must appear on each page.]

Company seal or trademark:

Signature of Official Veterinarian: _____

Date: _____

Printed name of Official Veterinarian:

Official Stamp:

