## 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

OUNTRT: UNI	ieu Siales	>				veterin	ary certific	ate to EU		
I.1. Consignor Name Address				I.2. Certif	icate referenc		I.2.a.			
	Tel.					I.3. Central competent authority USDA APHIS Veterinary Services				
						I.4. Local competent authority				
I.5. Consignee Name Address	Name				I.6. Person responsible for the consignment in the EU					
Postal code Tel.										
Tel. I.5. Consignee Name Address Postal code Tel. I.7. Country of ISC origin United States I.11. Place of origin	D code I.8. Re oric	gion of C	ode	I.9. Coun destin	try of Pation	ISO code	I.10 Region of destination	on Code		
I.11. Place of origin				I.12. Place	e of destination	n				
I.13. Place of loading				I.14. Date	of departure					
I.15. Means of transp	I.15. Means of transport				I.16. Entry BIP in EU					
					I.17. No.(s) of CITES					
	I.18. Description of commodity       Dog     Cat       Ferret					I.19. Comm	nodity code (HS c 010619			
LOg I.21. Temperature of							I.20. Quantity	/ number o		
I.23. Seal/Container N							Package I.24. Type of	es		
I.25. Commodities ce Pets X	<ul> <li>I.25. Commodities certified for: Pets X</li> <li>I.26. For transit to 3<sup>rd</sup> Country</li> </ul>									
I.26. For transit to 3 <sup>rd</sup>					For import or a	admission in	to EU			
I.28. Identification of t	he commodities									
Species (Scientific name)	Sex	Colour	E	Breed	Identification	n number	Identification system	Date of birth [dd/mm/yyyy]		
								1		

COUNTRY: United States 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

r	5/0/2013								
	II. He	ealth informa	ation	II.a.	Certificat	te referen	ce No	II.b.	
	I, the undersigned official veterinarian <sup>(1)</sup> /veterinarian authorised by the competent authority <sup>(1)</sup> ofthe Un America (insert name of territory or third country) certify that: <u>Purpose/nature of journey attested by the owner:</u> II.1. the attached declaration <sup>(2)</sup> by the owner or the natural person who has authorisation in writing from th out the non-commercial movement of the animals on behalf of the owner, supported by evidence <sup>(3)</sup> animals described in Box I.28 will accompany the owner or the natural person who has authorisation the owner to carry out the non-commercial movement of the animals on behalf of the owner within nu days of his movement and are not subject to a movement that aims at their sale or a transfer of during the non-commercial movement will remain under the responsibility of <sup>(1)</sup> either [the owner;] <sup>(4)</sup> or [the natural person who has authorisation in writing from the owner to carry out the non-commercial animals on behalf of the owner;]							writing from the o by evidence <sup>(3)</sup> , st as authorisation ir owner within not m r a transfer of ow n-commercial mov	wner to carr ates that th writing fror ore than fiv nership, an ement of th
	(1)	2. the anim 2. the anim going to natural p r [to attend [with an estation of rabies	animals on behalf of the owner;] the animals described in Box 1.28 are moved in a number of five or less;] the animals described in Box 1.28 are moved in a number of more than five, are more than six months old and are going to participate in competitions, exhibitions or sporting events or in training for those events, and the owner or the natural person referred to in point II.1 has provided evidence <sup>(3)</sup> that the animals are registered [to attend such event;] [with an association organising such events;] on of rabies vaccination and rabies antibody titration test:						
(4) either [II.3. the animals described in Box I.28 are less than 12 weeks old and have not received an anti-rabies vaccination, but 21 days at least between 12 and 16 weeks old and have received an anti-rabies vaccination, but 21 days at least since the completion of the primary vaccination against rabies carried out in accordance requirements set out in Annex III to Regulation (EU) No 576/2013 <sup>(d)</sup> , and II.3.1 the territory or third country of provenance of the animals indicated in Box I.1 is list. Implementing Regulation (EU) No 577/2013 and the Member State of destination indication informed the public that it authorises the movement of such animals into its territor.						lays at least have accordance with Box I.1 is listed ir ination indicated ir	not clapse the validit Annex II t Box I.5 ha		
<ul> <li>accompanied by</li> <li><sup>(4)</sup>either</li> <li>[II.3.2</li> <li>the attached declaration<sup>(6)</sup> of the owner or the natural person referred to in point II.1 statis until the time of the non-commercial movement the animals have had no contact with species susceptible to rabies;]</li> <li><sup>(4)</sup>or</li> <li>[II.3.2</li> <li>their mother, on whom they still depend, and it can be established that the mother reception of the organization which complied with the validity requirements set ou Regulation (EU) No 576/2013;]]</li> </ul>									
	<sup>(1)</sup> or/and [II.3. the animals described in Box I.28 were at least 12 weeks old at the time of vaccination against rabies and at days have elapsed since the completion of the primary anti-rabies vaccination <sup>(4)</sup> carried out in accordance validity requirements set out in Annex III to Regulation (EU) No 576/2013 and any subsequent revaccinat carried out within the period of validity of the preceding vaccination <sup>(6)</sup> ; and					ince with th			
	<sup>(1)</sup> e	(ither [II.3.1] the animals described in Box I.28 come from a territory or a third country listed in Annex Implementing Regulation (EU) No 577/2013, either directly, through a territory or a third country list Annex II to Implementing Regulation (EU) No 577/2013 or through a territory or a third country other those listed in Annex II to Implementing Regulation (EU) No 577/2013 in accordance with point ( Article 12(1) of Regulation (EU) No 576/2013 <sup>(7)</sup> , and the details of the current anti-rabies vaccination provided in the table below;]					Intry listed i ry other tha n point (c) c		
	<sup>(4)</sup> or [II.3.1 the animals described in Box I.28 come from, or are scheduled to transit through, a territory country other than those listed in Annex II to Implementing Regulation (EU) No 577/2013 and antibody titration test <sup>(8)</sup> , carried out on a blood sample taken by the veterinarian authorised competent authority on the date indicated in the table below not less than 30 days after the prvaccination and at least three months prior to the date of issue of this cortificate, proved an antibe equal to or greater than 0.5 IU/ml <sup>(9)</sup> and any subsequent revaccination was carried out within the prvalidity of the preceding vaccination <sup>(6)</sup> , and the details of the current anti-rabies vaccination and to of sampling for testing the immune response are provided in the table below:						and a rabic rised by th the precedin antibody titr the period (		
	Trans	oonder or tattoo				Validity of	vaccination		
	Alphanume code of th animal	Date eric implan	tation I/or ng <sup>(10)</sup>	Date of vaccination [dd/mm/yyyy]	Name and manufacturer of vaccine	Batch number	From [dd/mm/yyyy]	To [dd/mm/yyy]	Date of the blood sampling [dd/mm/ yyyy]
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II.	Health information		II.a. Certificate reference No		II.b.		
<sup>(1)</sup> oither	Regulation (EU) 2018/878 and have been treated against <i>Echinococcus multilocularis</i> , and the details of the treatment carried out by the administering veterinarian in accordance with Article 6 of Commission Delegated Regulation (EU) 2018/772 <sup>(11)(12)(13)</sup> are provided in the table below.]						
		Anti-ec	hinococcus	Administor	ing veterinarian		
	onder or mber of the	tre Name and	atment	Auminister			
d	log	manufacturer of the product	Date [dd/mm/yyyy] and time of treatment [00:00]	Name in capitals, stamp and signature			
Notes         (a)       This certificate is meant for dogs ( <i>Canis lupus familiaris</i> ), cats ( <i>Felis silvestris catus</i> ) and ferrets ( <i>Mustela putorius furo</i> ).         (b)       This certificate is valid for 10 days from the date of issue by the official veterinarian until the date of the documentary and identity checks at the designated Union travellers' point of entry (available at 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 journey by sea.         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 cases 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 referred to in point II.3 cases to apply, whichever date is earlier. Please note that certain Member State of first destination.         Part I:       Box 1.5:       Consignee: indicate Member State of first destination.         Box 1.28:       Identification number: indicate the transponder or tattoo alphanumeric code. Date of birth/breed: as stated by the owner.							
Part II: (1) (2) (3) (4) (5) (6) (7) (8)	<ul> <li>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.</li> <li>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.</li> <li>Any revaccination must be considered a primary vaccination if it was not carried out within the period of validity of a previous vaccination.</li> <li>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.</li> <li>A certified copy of the identification and vaccination details of the animals concerned shall be attached to the certificate.</li> <li>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.</li> </ul>						

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11.	Health information	II.a.	Certificate reference No	II.b.			
			al, which following that test with satisfactor	y results, has been revaccinated			
	against rabies within the period o A certified copy of the official report f		•	s antibody test referred to in point			
	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)			onfirms that he has verified, to the best of his port, the authenticity of the laboratory repo				
(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 the Member States or parts thereof listed in				
		ombination,	hich contains the appropriate dose of praziqu have been proven to reduce the burden of ost species concerned.				
(12)							
(13)	The table referred to in point II.4 m	nust be use	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:						
Endo	rsement by the competent authority (not nece	essary wher	the certificate is signed by an official veterin	arian)			
	Name (in capital letters):		Qualification	and title:			
	Address						
	Telephone:						
	Date:		Signature:				
	Stamp:						
Officia	al at the travellers' point of entry (for the purpo	ose of furth	er 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:			

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## Declaration

## I, the undersigned

.....

[owner or the natural person who has authorisation in writing from the owner to carry out the non-commercial movement on behalf of the  $owner^{(1)}$ ]

declare that the following pet animals are not subject to a movement that aims at their sale or a transfer of ownership and will accompany the owner or the natural person who has authorisation in writing from the owner to carry out the non-commercial movement on behalf of the owner<sup>(1)</sup> within not more than 5 days of his movement.

Transponder/tattoo <sup>(1)</sup> alphanumeric code	Animal health certificate number

During the non-commercial movement, the above animals will remain under the responsibility of

<sup>(1)</sup>either [the owner];

- (*H*) or [the natural person who has authorisation in writing from the owner to carry out the noncommercial movement on behalf of the owner]

Place and date:

Signature of the owner or natural person who has authorisation in writing from the owner to carry out the non-commercial movement on behalf of the owner<sup>(1)</sup>:

(1) delete as appropriate.