Veterinary Authority	Date Of Issue	Certificate Number		
	CERTIFICATION			
•	escribed herein conform to the	e current veterinary import requiremen ate of issue by the examining veterinari		
Consignor/Shipper/Owner:	2. Consigno	2. Consignee/Broker/Owner:		
3. Country of Origin:	4. Date of	4. Date of Shipment:		
5. Country of Destination: United States of Am		6. State of Destination:		
7. Home Quarantine Address:	8. Port of E	8. Port of Embarkation / Border Crossing:		
9. Date of Veterinary Inspection:	10. Means	10. Means of Transport:		
11. Description of Commodity: Day-Old Poultry (live	poultry of up to 3 days of age,)		
12. Total Quantity:	13. Total N	13. Total Number of Shipping Containers:		
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Veterinary Health Certificate for Export of <i>Day-Old Poultry</i> to the United States of America from European Poultry Trade Region (EPTR)							
Veterinary Authority		Date of Issue	Certificate Nun	nber			
	fficial veterinarian certifies for export that the			under this health certificate			
were	inspected by the examining veterinarian issui The flock of origin for the DOP was not vaccion	_					
2.	The flock of origin for the DOP:	nated against any 113 of 117.	subtype of avian influenza.				
	☐ Was not vaccinated against Newcastle di	isease (avian paramyxovirus	s).				
	OR	, ,	•				
	☐ Was vaccinated against Newcastle disease of Newcastle disease virus. Date Vaccinated:	se at least 21 days prior to e	export using vaccines that o	do not contain any velogenic strains			
3.							
	first egg laid for this shipment.						
4.	· · · · · · · · · · · · · · · · · · ·						
5.	The flock or the flock(s) of origin is negative vAvian metapneumovirus (also known as			oma) At least 20 naultry per house			
				ome). At least 30 poultry per nouse			
	were tested using any of the following methods: rRT-PCR, ELISA, or serology. Note: Testing for avian metapneumovirus does not apply to waterfowl species.						
	The health certificate must state if poul			ise.			
	Date Vaccinated: 🗖 Not	Vaccinated					
	• Egg Drop Syndrome (EDS 76). At least 5		0 birds from the flock of o	rigin were negative for egg drop			
_	syndrome. Note: This statement does no						
6.	The flock of origin tested negative for Salmon	nella enteritidis (SE) within 3	30 days by environmental o	culture and there is no evidence or			
7.	knowledge of SE present in the flock.	and Newcastle Disease: FIT	HER				
,.	7. For Highly Pathogenic Avian Influenza (HPAI) and Newcastle Disease: EITHER a. The DOP did not originate from, nor transit through, any zone within the EPTR that was restricted for outbreaks of Newcastle						
	disease or HPAI in commercial poultry for						
	i. Until the restrictions were lifted						
	ii. 90 days after depopulation of all		-				
		e with seals approved by the	e competent authority and	corresponding numbers listed on			
	the import health certificate. OR						
		e within the FPTR that was r	estricted for outbreaks of	Newcastle disease or HPAI but did			
	b. The DOP did not originate from any zone within the EPTR that was restricted for outbreaks of Newcastle disease or HPAI but did travel under official seal through zones that were restricted for outbreaks of Newcastle disease or HPAI in commercial poultry						
	for the following period of time, whichever is later:						
	i. Until the restrictions were lifted						
	ii. 90 days after depopulation of all affected premises, followed by cleaning and disinfection of the last affected premises, in						
	that zone. Shipments must arrive the import health certificate.	e with seals approved by the	e competent authority and	corresponding numbers listed on			
	•	mhers must he noted in the	health certificate signed by	y the certifying veterinarian, with			
		erifying the seals for such sh		·			
8.	The DOP were not commingled with other bi						
9.	The DOP were placed in new or appropriatel	y sanitized packaging for shi	ipment to the United State	s at the premises where the flock			
	or origin was kept.						
	*******Certificate s	hall be valid for 30 days fror	n date of issue*******	******			
The off	icial veterinarian must endorse the examin	nina votorinarian's sianat	ura OP the official votori	ingrian's signature and			
	ment seal may be used alone if the official			nanan s signature ana			
govern	ment searmay be used dione if the official	vetermanan conducted t	ne mspection.				
	ing Veterinarian:						
Name	of Examining Veterinarian (Printed)	Signature of Examini	ng Veterinarian	Date			
Official	Veterinarian:						
Name	of Official Veterinarian (Printed)	Signature of Official	Veterinarian	Date			

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