



GREAT BRITAIN, CHANNEL ISLANDS AND ISLE OF MAN

Pet health certificate for the non-commercial movement to Great Britain, Channel Islands and Isle of Man of dogs, cats or ferrets in accordance with Regulation (EU) No 576/2013

COUNTRY: UNITED STATES

Veterinary certificate to Great Britain, Channel Islands and Isle of Man

Part I: Details of dispatched consignment	I.1. Consignor Name Address Tel.		I.2 Certificate reference number				
			I.3. Consignee Name Address Postal code Tel.				
	I.4. Central competent authority USDA, APHIS, Veterinary Services		I.5. Country of origin United States				
	I.6. Local competent authority		I.7. ISO Code of country of origin US				
	I.8. Description of commodity Dog Cat Ferret			I.9. Commodity code (HS code) 010619			
	I.10. Quantity	I.11. Commodities certified for: Pets <input type="checkbox"/>					
	I.12. Identification of the commodities						
	Species (Scientific name)	Sex	Colour	Breed	Identification number	Identification system [transponder/ tattoo ⁽¹⁰⁾]	Date of birth [dd/mm/yyyy]

Part II: Certification

II. Health information	II.a. Certificate reference number
<p>I, the undersigned official veterinarian ⁽¹⁾ / veterinarian authorised by the competent authority ⁽¹⁾ of the United States of America..... <i>(insert name of country)</i> certify that:</p> <p>Purpose/nature of journey attested by the owner</p> <p>II.1. the attached declaration ⁽²⁾ by the owner or the natural person who has authorisation in writing from the owner to carry out the non-commercial movement of the animals on behalf of the owner, supported by evidence ⁽³⁾, states that the animals described in Box I.12 will accompany the owner or the natural person who has authorisation in writing from the owner to carry out the non-commercial movement of the animals on behalf of the owner within not more than 5 days of his movement and are not subject to a movement that aims at their sale or a transfer of ownership, and during the non-commercial movement will remain under the responsibility of</p> <p style="margin-left: 40px;">(1) either [the owner;]</p> <p style="margin-left: 40px;">(1) or _____ [the natural person who has authorisation in writing from the owner to carry out the non-commercial movement of the animals on behalf of the owner;]</p> <p style="margin-left: 40px;">(1) or _____ [the natural person designated by a carrier contracted by the owner to carry out the non-commercial movement of the animals on behalf of the owner;]</p> <p>(1) either II.2. the animals described in Box I.12 are moved in a number of five or less;</p> <p>(1) or II.2. the animals described in Box 1.12 are moved in a number of more than five are more than 6 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 ⁽³⁾ that the animals are registered</p> <p style="margin-left: 40px;">(1) either [to attend such event;]</p> <p style="margin-left: 40px;">(1) or [with an association organising such events;]</p>	

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II. Health information	II.a. Certificate reference number																																																							
<p>Attestation of rabies vaccination and rabies antibody titration test</p> <p>II.3. the animals described in Box I.12 were at least 12 weeks old at the time of vaccination against rabies and at least 21 days have elapsed since the completion of the primary anti-rabies vaccination ⁽⁴⁾ carried out in accordance with the validity requirements set out in Annex III to Regulation (EU) No 576/2013 and any subsequent revaccination was carried out within the period of validity of the preceding vaccination ⁽⁵⁾; and</p> <p>(¹) <i>either</i> [II.3.1 the animals described in Box I.12 come from a third country listed in Annex II to Implementing Regulation (EU) No 577/2013, either directly, through a third country listed in Annex II to Implementing Regulation (EU) No 577/2013 or through a third country other than those listed in Annex II to Implementing Regulation (EU) No 577/2013 in accordance with point (c) of Article 12(1) of Regulation (EU) No 576/2013 ⁽⁶⁾, and the details of the current anti-rabies vaccination are provided in the table below:]</p> <p>(¹) <i>or</i> [II.3.1 the animals described in Box I.12 come from, or are scheduled to transit through a third country other than those listed in Annex II to Implementing Regulation (EU) No 577/2013 and a rabies antibody titration test ⁽⁷⁾, carried out on a blood sample taken by the veterinarian authorised by the competent authority on the date indicated in the table below not less than 30 days after the preceding primary vaccination within a current valid vaccination series and at least 3 months prior to the date of issue of this certificate, proved an antibody titre equal to or greater than 0,5 IU/ml ⁽⁸⁾ and any subsequent revaccination was carried out within the period of validity of the preceding vaccination ⁽⁵⁾, and the details of the current anti-rabies vaccination and the date of sampling for testing the immune response are provided in the table below:]</p>																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">Transponder or tattoo</th> <th rowspan="2" style="text-align: center;">Date of vaccination [dd/mm/yyyy]</th> <th rowspan="2" style="text-align: center;">Name and manufacturer of vaccine</th> <th rowspan="2" style="text-align: center;">Batch number</th> <th colspan="2" style="text-align: center;">Validity of vaccination [dd/mm/yyyy]</th> <th rowspan="2" style="text-align: center;">Date of the blood sampling [dd/mm/yyyy]</th> </tr> <tr> <th style="text-align: center;">Alphanumeric code of the animal</th> <th style="text-align: center;">Date of implantation and/or reading ⁽⁹⁾ [dd/mm/yyyy]</th> <th style="text-align: center;">From</th> <th style="text-align: center;">To</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td align="center"><i>and</i></td> <td></td> <td></td> <td></td> <td rowspan="6" style="text-align: center; vertical-align: middle;"> <div style="font-size: 4em; position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); opacity: 0.5;">X</div> </td> </tr> <tr> <td></td> <td></td> <td></td> <td align="center"><i>and</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td align="center"><i>and</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td align="center"><i>and</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td align="center"><i>and</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td align="center"><i>and</i></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Transponder or tattoo		Date of vaccination [dd/mm/yyyy]	Name and manufacturer of vaccine	Batch number	Validity of vaccination [dd/mm/yyyy]		Date of the blood sampling [dd/mm/yyyy]	Alphanumeric code of the animal	Date of implantation and/or reading ⁽⁹⁾ [dd/mm/yyyy]	From	To				<i>and</i>				<div style="font-size: 4em; position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); opacity: 0.5;">X</div>				<i>and</i>							<i>and</i>							<i>and</i>							<i>and</i>							<i>and</i>			
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Non-commercial movement to Great Britain, Channel Islands and Isle of Man of dogs, cats or ferrets in accordance with of Regulation (EU)

COUNTRY: UNITED STATES

No 576/2013

II. Health information	II.a. Certificate reference number		
Attestation of anti-parasite treatment			
<p>(¹) <i>either</i> [II.4. the dogs described in Box I.12 are destined for Great Britain, Channel Islands and Isle of Man 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 Delegated Regulation (EU) No 2018/772 (¹⁰) (¹¹) are provided in the table below.]</p> <p>(¹) <i>or</i> [II.4. the dogs described in Box I.12 have not been treated against <i>Echinococcus multilocularis</i> (¹⁰).]</p>			
Transponder or tattoo number of the dog	Anti-echinococcus treatment		Administering veterinarian
	Name and manufacturer of the product	Date [dd/mm/yyyy] and time of treatment [00:00]	Name in capitals, stamp and signature
	<i>and</i>	<i>and</i>	
	<i>and</i>	<i>and</i>	
	<i>and</i>	<i>and</i>	
	<i>and</i>	<i>and</i>	
	<i>and</i>	<i>and</i>	
Notes			
<p>(a) This certificate is meant for dogs (<i>Canis Lupus familiaris</i>) cats (<i>Felis silvestris Cetus</i>) and ferrets (<i>Mustela putorius furo</i>).</p> <p>(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 point of entry into Great Britain, Channel Islands and Isle of Man</p> <p>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</p>			
Part I:			
Box I.3: <i>Consignee</i> : indicate Great Britain, Channel Islands and Isle of Man as destination.			
Box I.12: <i>Identification system</i> : select of the following: transponder or tattoo.			
<i>Identification number</i> : indicate the transponder or tattoo alphanumeric code.			
<i>Date of birth/breed</i> as stated by the owner.			

II. Health information	II.a. Certificate reference number
<p>Part II:</p> <p>(¹) Keep as appropriate.</p> <p>(²) 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,</p> <p>(³) 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.</p> <p>(⁴) Any revaccination must be considered a primary vaccination if it was not carried out within the period of validity of a previous vaccination.</p> <p>(⁵) A certified copy of the identification and vaccination details of the animals concerned shall be attached to the certificate.</p> <p>(⁶) 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 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.</p> <p>(⁷) The rabies antibody titration test referred to in point II.3.1:</p> <ul style="list-style-type: none"> – must be carried out on a sample collected by a veterinarian authorised by the competent authority, at least 30 days after the primary rabies vaccination within a current valid vaccination series and 3 months before the date of import; – must measure a level of neutralising antibody to rabies virus in serum equal to or greater than 0,5 EU/ml; – must be performed by a laboratory approved in accordance with Article 3 of Council Decision 2000/258/EC (list of approved laboratories available at https://ec.europa.eu/food/animals/pet-movement/approved-labs_en); – does not have to be renewed on an animal, which following that test with satisfactory results, has been revaccinated against rabies within the period of validity of a previous vaccination. <p>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.</p> <p>(⁸) By certifying this result, the official veterinarian confirms that he has verified, to the best of his ability and where necessary with contacts with the laboratory indicated in the report, the authenticity of the laboratory report on the results of the antibody titration test referred to in point II.3.1.</p> <p>(⁹) 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.</p>	

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II. Health information	II.a. Certificate reference number
<p>(¹⁰) The treatment against <i>Echinococcus multilocularis</i> referred to in point II.4 must:</p> <ul style="list-style-type: none">- be administered by a veterinarian within a period of not more than 120 hours and not less than 24 hours before the time of the scheduled entry of the dogs into Great Britain, Channel Islands and Isle of Man;- consist of an approved medicinal product which contains the appropriate dose of praziquantel or pharmacologically active substances, which alone or in combination, have been proven to reduce the burden of mature and immature intestinal forms of <i>Echinococcus multilocularis</i> in the host species concerned. <p>(¹¹) The table referred to in point I1.4 must be used to document the details of a further treatment if administered after the date the certificate was signed and prior to the scheduled entry into Great Britain, Channel Islands and Isle of Man.</p>	
<p>Official veterinarian/Authorised veterinarian (delete as appropriate)</p> <p>Name (in capital letters): _____ Qualification and title: _____</p> <p>Address _____</p> <p>Telephone: _____</p> <p>Date: _____ Signature: _____</p> <p>Stamp: _____</p>	
<p>Endorsement by the competent authority (not necessary when the certificate is signed by an official veterinarian)</p> <p>Name (in capital letters): _____ Qualification and title: _____</p> <p>Address _____</p> <p>Telephone: _____</p> <p>Date: _____ Signature: _____</p> <p>Stamp: _____</p>	

Official at point of entry in GB

Name (in capital letters):

Title:

Address

Telephone:

E-mail address:

Date of completion of documentary and identity checks by authorised body:

Signature:

Stamp:

Section A - Model of 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⁽¹⁾ within not more than 5 days of his movement.

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

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

⁽¹⁾ *either* [the owner];

⁽¹⁾ *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⁾ *or* ~~[the natural person designated by the carrier contracted to carry out the non-~~

~~commercial movement on behalf of the owner:~~

~~(insert name of the carrier)]~~

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⁽¹⁾:

.....

⁽¹⁾ delete as appropriate.