

Part I : Details of consignment presented	1. Consignor / Exporter <input type="checkbox"/> Name Address Country + ISO code		2. CVED reference number		Local reference number:	
			Border Inspection Post			
			Unit number			
	3. Consignee Name Address Postal code Country + ISO code		4. Person responsible for the consignment Name Address			
			5. Country of origin + ISO code		6. Region of origin Code	
	7. Importer Name Address Postal code Country + ISO code		8. Place of destination Name Approval number Address Postal code Country + ISO code			
	9. Arrival at BIP (estimated date and time) Date Time		10. Veterinary documents Number(s) Date of issue Accompanying document(s) Number(s)			
	11. Means of transport Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Railway wagon <input type="checkbox"/> Road vehicle <input type="checkbox"/> Other <input type="checkbox"/> Identification:: Wagon / Vehicle / Trailer No.:					
			12. Animal species, Breed		13. Commodity code (CN code)	
					14. Number of animals	
				15. Number of packages		
16. Animals certified as: Breeding/production <input type="checkbox"/> Fattening <input type="checkbox"/> Slaughter <input type="checkbox"/> Approved bodies <input type="checkbox"/> Pets <input type="checkbox"/> Other <input type="checkbox"/> Quarantine <input type="checkbox"/> Registered equidae <input type="checkbox"/> Relaying <input type="checkbox"/> Circus/exhibition <input type="checkbox"/>						
17. Seal number and container numbers						
18. For transhipment to <input type="text"/>		19. For transit to 3rd Country <input type="text"/>				
BIP <input type="text"/> BIP unit n° <input type="text"/>		3rd country <input type="text"/> + ISO code <input type="text"/>				
3rd country <input type="text"/> 3rd Country ISO code <input type="text"/>		Exit BIP <input type="text"/> BIP unit n° <input type="text"/>				
20. For import or admission Definitive import <input type="text"/> Horses Re-entry <input type="text"/> Temporary admission horses <input type="text"/> Exit date <input type="text"/> Exit point <input type="text"/>		21. Transiting Member states <input type="text"/> Member State <input type="text"/> + ISO code <input type="text"/> Member State <input type="text"/> + ISO code <input type="text"/> Member State <input type="text"/> + ISO code <input type="text"/>				
22. Means of transport after border inspection post Railway wagon <input type="text"/> Registered No. <input type="text"/> Aeroplane <input type="text"/> Flight No. <input type="text"/> Ship <input type="text"/> Name <input type="text"/> Road vehicle <input type="text"/> Plate No. <input type="text"/> Other <input type="text"/>		23. Transporter Name <input type="text"/> Approval number <input type="text"/> Address <input type="text"/> Postal code <input type="text"/> Country <input type="text"/>				
		24. Route plan Yes <input type="text"/> No <input type="text"/>				
I, the undersigned person responsible for the load detailed above, certify that to the best of my knowledge and belief the statements made in Part I of this document are true and complete and I agree to comply with the legal requirements of Directive 91/496/EEC, including payment for veterinary checks, as well as for redispaching consignments, for quarantine or isolation of animals, or costs of euthanasia and disposal if necessary.		Place and date of declaration Name of signatory Signature				

Part II: decision on consignment	26. Documentary Check <input type="checkbox"/> EU Standard Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/> Additional guarantees Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/> National requirements Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	27. CVED Reference Number Local reference number <hr/> 28. Identity Check Derogation <input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>
	29. Physical Check: Derogation <input type="checkbox"/> Total animal checked Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	30. Laboratory Tests No <input type="checkbox"/> Yes <input type="checkbox"/> Tested for: Random <input type="checkbox"/> Suspicion <input type="checkbox"/> Results: Pending <input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>
	31. Welfare check Derogation <input type="checkbox"/> upon arrival Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	32. Impact of the transport on animals Number of dead animals Estimation <input type="checkbox"/> Number of unfit animals Estimation <input type="checkbox"/> Number of birth or abortion
	33. ACCEPTABLE for Transhipment <input type="checkbox"/> BIP BIP unit n° 3rd country 3rd Country ISO code	34. ACCEPTABLE for Transit Procedure <input type="checkbox"/> To 3rd Country + ISO code Exit BIP BIP unit n°
	35. ACCEPTABLE for definitive import <input type="checkbox"/> For controlled destination Slaughter <input type="checkbox"/> Approved bodies <input type="checkbox"/> Quarantine <input type="checkbox"/>	36. ACCEPTABLE for temporary admission <input type="checkbox"/> Deadline
	38. NOT ACCEPTABLE <input type="checkbox"/> 1. Re-dispatching <input type="checkbox"/> 2. Slaughter <input type="checkbox"/> 3. Euthanasia <input type="checkbox"/>	37. Reason for Refusal 1. Absence/Invalid certificate <input type="checkbox"/> 2. Mis-match with documents <input type="checkbox"/> 3. Non approved country <input type="checkbox"/> 4. Non approved region <input type="checkbox"/> 5. Prohibited species <input type="checkbox"/> 6. Absence of additional guarantees <input type="checkbox"/> 7. Safeguard clause <input type="checkbox"/> 8. Diseased or suspect animals <input type="checkbox"/> 9. Non satisfactory tests <input type="checkbox"/> 10. Unfit to travel <input type="checkbox"/> 11. Absence of national requirements <input type="checkbox"/> 12. Infringement of international transportation regulation <input type="checkbox"/> 13. Absence or non legal identification <input type="checkbox"/> 14. Other <input type="checkbox"/>
	39. Details of Controlled Destinations (35,36,38) Approval no (where relevant): Address: Postal code	
	40. Consignment resealed New seal no:	
	41. Full identification of border inspection post and official stamp. BIP Stamp BIP unit n°	42. Official Veterinarian I the undersigned official veterinarian for the BIP, certify that the veterinary checks on the consignment have been carried out in accordance with EU requirements and if needed in accordance with the national requirements of the member states of destination. Name (in Capital): Date: Signature:
	43. Customs Document Reference:	

Part III: Control	44. Details on re-dispatching Means of transport n° Railway wagon <input type="checkbox"/> Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Road vehicle <input type="checkbox"/> Country of re-dispatching + ISO code Date:
	45. Follow up Exit BIP <input type="checkbox"/> Final destination BIP <input type="checkbox"/> Local Veterinary Unit <input type="checkbox"/> Arrival of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/> Correspondence of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/>
	46. Official veterinarian Name (in Capital): Address: Date: Stamp Unit number Signature:

**ANNEX II
CHAPTER VIII
ROUTE PLAN**

<p>(1) Transporter (name, address, business name):</p> <p>Signature of transporter</p>	<p>(2) Means of transport:</p> <p>No of registration or identification</p>	(a)	(a)
<p>(3) Animal species: Number: Place of departure: Place and country of destination</p>	<p>(4) Itinerary: Estimated journey time:</p>	(a)	(a)
<p>(5) Number of health certificate(s) or accompanying documents(s):</p>	<p>(6) Stamp of veterinarian at place of departure</p>	(a)	(b)
<p>(8) Date and time of departure:</p>	<p>(9) Name of person in charge of transport during journey:</p>	(a)	(b)
<p>(11) Planned staging or transfer points:</p>	<p>(10) Stamp of competent authority at point of exit or authorized crossing point</p>	(a)	(c)
<p>(13) Place and address</p> <p>i)</p> <p>ii)</p> <p>iii)</p> <p>iv)</p> <p>v)</p> <p>vi)</p>	<p>(12) Actual staging or transfer points:</p> <p>(14) Date and time</p>	(a)	(d)
<p>(19) (a) To be completed by the transporter before departure. (b) To be completed by the appropriate veterinarian. (c) To be completed by the transporter during the journey. (d) To be completed by the competent authority at the point of exit or authorized crossing point. (e) To be completed by the transporter after the journey.</p>	<p>(15) Length of stop</p> <p>(16) Reason</p> <p>(17) Place and address</p> <p>(18) Date and time</p>	(a)	(d)
<p>(22) Observations:</p>	<p>(20) Signature of person in charge during journey:</p> <p>(21) Date and time of arrival at place of destination:</p>	(c)	(e)