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| --- | --- |
| Name and Address of Exporter | **Name and Address of Importer** |
| AUSTRALIA |  UNITED STATES OF AMERICA |
| Import Permit No |   |
| Description of Animal Reproductive Material |
| Number | Kind (Species and type; eg bovine semen) | Condition (Fresh/Frozen) | Identification (straw numbers, packing list) |
|  |  |  |  |
|  |  **EQUINE SEMEN** | **FROZEN STRAWS** | **SEE ATTACHED** |
|  |  |  |  |

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| I, Dr ………, an approved ….. (Name of SCC) SCC’s Veterinarian, declare that the goods described in the following pages have complied with the importing country requirements.  |
|  |  |  |  |
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|  |  |  |  |
| **Signature (pdf. doc only)** |  | **Date**  |  |
|  |  |  |  |
| 1. This is to declare that the semen described in this document was collected in a country that is recognized by USDA APHIS to be free of African horse sickness and was free of disease at the time of semen collection.
2. The semen was collected and processed in a semen collection center approved by the competent authority of Australia and processed under the supervision of the veterinarian in charge of the center.
3. It was collected and processed using equipment that was new or that has been cleaned and sanitized prior to use under the supervision of the center veterinarian
4. It was processed with semen extender containing milk originated from a country recognized by USDA APHIS at the time of Semen collection as free of foot and mouth disease and/or containing egg originating from a country or region recognized by USDA APHIS at the time of semen collection as free of Newcastle disease and not affected by reportable avian influenza.
5. The semen was placed in individual straws or ampules which are permanently marked with the identification of the donor, the date of collection and the name or approval number of the semen collection center.
6. The semen was maintained after processing under lock and key or in the custody of the center veterinarian in a segregated storage area in the semen collection center until it was placed in a shipping container.
7. The shipping container was either new or has been cleaned and disinfected, and for frozen semen, was packed only with fresh liquid nitrogen.
8. None of the semen for export to the United States has been stored or transported with semen produced under less than equivalent animal health conditions.
9. The shipping container/s was/were sealed with an official seal of the exporting country. The official seal number is recorded on the health certificate.
10. The semen is routed directly to the United States from the country in which it was collected with no other stops other than those provided on the USDA APHIS health certificate.
11. The donor stallion has been isolated under the supervision of the veterinarian in charge of the center from equidae not certified and tested, or under any restrictions that would make them ineligible as semen donors for export to the United States.
12. The donor stallion has been inspected and found to be free of evidence of and not exposed to any contagious and infectious diseases on the day of semen collection.
13. The donor stallion has been free from any quarantine or movement restrictions for not less than 60 days prior to semen collection.
14. The donor stallion was not used for natural breeding while the donor stallion is in the semen collection center, and during semen collection for export to the United States;
15. The donor stallion has been isolated under the supervision of the veterinarian in charge of the center from equidae not certified and tested, or under any restrictions that would make them ineligible as semen donors for export to the United States.

Container seal number: **XXXXXX** |

**Attachment - Schedule**

**ATTACHMENT TO VETERINARY CERTIFICATE**

**FOR EXPORT OF EQUINE SEMEN FROM AUSTRALIA TO USA**

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| **IDENTIFICATION OF STALLION:** |
| **Name** | **Breed** | **Id Details** (MC/brand/tattoo) |
|   |   |  |
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|  |
|  |  |  |
| **IDENTIFICATION OF STRAWS:** |
| Stallion Id:  | Collection Date: | Number of straws:  |
| Al Unit (Name / accreditation No):  |

**TOTAL NUMBER OF STRAWS:**

|  |  |  |
| --- | --- | --- |
| **Signature (pdf. doc only)** |  | **Date**  |