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| **Model health certificate for imports of in vivo derived embryos of domestic animals of the bovine species collected in  accordance with Council Directive 89/556/EEC (Decision 2006/168) GBHC006X Version 1.0 Nov 2020** | | | | | | | | | | | | | | | | |
| **Part I: Details of dispatched consignment** | I.1. Consignor | | | | | | | ~~I.2. Certificate reference No~~ | | | | | | I.2.a. | | |
| Name:  Address:  Tel.: | | | | | | |  | | | | | |
| I.3. Central competent authority | | | | | | | | |
| Department of Agriculture, Water and the Environment | | | | | | | | |
| I.4. Local competent authority | | | | | | | | |
| Department of Agriculture, Water and the Environment | | | | | | | | |
| I.5. Consignee | | | | | | | 1.6. Person responsible for the load in Great Britain, Channel Islands and the Isle of Man | | | | | | | | |
| Name:  Address:    Postal code:  Tel.: | | | | | | | Name:  Address:    Postal code:  Tel.: | | | | | | | | |
| I.7. Country of origin | ISO code | | I.8. Region of Origin | | | Code | I.9. Country of destination | | | ISO Code | I.10. Region of destination | | | | Code |
| **Australia** | **AU** | | **Victoria** | | | **VIC** | **UNITED KINGDOM** | | | **GB** |  | | | |  |
| I.11. Place of origin | | | | | | | I.12. Place of destination | | | | | | | | |
| Name:  Address:  Approval Number: **xxx(input your GB team approval no.)** | | | | | | | Name:  Address:    Postal code: | | | | | | | | |
| I.13. Place of loading | | | | | | | I.14. Date of departure | | | | | | | | |
| **MELBOURNE** | | | | | | | **DD/MM/YYYY** | | | | | | | | |
|  | I.15. Means of transport | | | | | | | I.16. Entry BCP in Great Britain, Channel Islands and the Isle of Man. | | | | | | | | |
| Aeroplane ⌧ Ship 🞏 Railway wagon 🞏  Road vehicle 🞏 Other 🞏  Identification: **FLIGHTS:**  Documentary references: **MAWB:** | | | | | | |  | | | | | | | | |
| I.17. | | | | | | | | |
| I.18 Description of commodity | | | | | | | | | | | | I.19 Commodity code (HS code) | | | |
| FROZEN BOVINE EMBRYOS | | | | | | | | | | | | **05 11 99 85** | | | |
| I.20. Quantity: | | | |
| **# EMBRYOS** | | | |
| I.21. | | | | | | | | | | | | I.22. Number of packages | | | |
| **# CRYOGENIC TANK** | | | |
| I.23. Seal / Container Number | | | | | | | | | | | | I.24. | | | |
| Seal: **XXXXXX** Container Serial No: **XXXXXX** | | | | | | | | | | | |
| I.25. Commodities certified for: | | | | | | | | | | | | | | | |
| Artificial reproduction ⌧ | | | | | | | | | | | | | | | |
| I.26. For transit through Great Britain, Channel Islands and the Isle of Man to third country 🞏 | | | | | | | | | I.27. For import or admission into Great Britain, Channel Islands and the Isle of Man ⌧ | | | | | | |
| Third Country ISO code | | | | | | | | |
| I.28. Identification of the commodities | | | | | | | | | | | | | | | |
| Species  (Scientific name) | | Breed | | Category | Donor Identity | | | Collection date  (Date of freezing) | | | Quantity | | | Approval number of the team | |
| **Bos Taurus / Bos indicus** | | **XXXX** | | ***in vivo derived embryos*** | **See Attachment** | | |  | | |  | | | **xxx(input your GB team approval no.)** | |
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|  | **AUSTRALIA** | **In vivo-derived bovine embryos** | |
|  | II. Health Information | ~~II.a. Certificate reference No~~ | II.b. |
|  |  |
| **Part II: Certification** | I, **Dr**…………… the undersigned embryo team veterinarian of………………………., hereby declare that:  ~~II.1. The embryos to be exported:~~  ~~II.1.1. were collected in AUSTRALIA, which according to official findings:~~  ~~II.1.1.1. was free from rinderpest during the 12 months immediately prior to their collection~~;  ~~(~~~~1~~~~) either [II.1.1.2. was free from foot-and-mouth disease and lumpy skin disease during the 12 months immediately prior to their collection and did not carry out vaccination against foot-and-mouth disease or lumpy skin disease during that period.~~  ~~(~~~~1~~~~) or [II.1.1.2. was not free from foot-and-mouth disease or lumpy skin disease during the 12 months immediately prior to their collection or carried out vaccination against foot-and-mouth disease or lumpy skin disease during that period, and:~~  ~~- the embryos were not subjected to penetration of the zona pellucida,~~  ~~- the embryos were stored under approved conditions for at least 30 days immediately after their collection,~~  ~~- the donor females come from holdings on which no animal was vaccinated against foot-and-mouth disease or lumpy skin disease during the 30 days prior to collection and no animal of a susceptible species showed clinical signs of foot-and-mouth disease or lumpy skin disease during the 30 days prior to, and at least the 30 days after, the embryos were collected.]~~  II.1.2. were collected by the embryo collection team (3) which:   * has been approved in accordance with Chapter I of Annex A to Directive 89/556/EEC; * which carried out the collection, processing, storing and transport of the embryos in accordance with Chapter II of Annex A to Directive 89/556/EEC; * is subject to inspection by an official veterinarian at least twice a year.   II.1.3. were collected and processed on premises situated in an area of at least 10 km radius centred on them, on which according to official findings there was no occurrence of foot-and-mouth disease, epizootic haemorrhagic disease, vesicular stomatitis, Rift Valley fever, contagious bovine pleuropneumonia or lumpy skin disease in the 30 days immediately prior to their collection and until dispatch to Great Britain, in the case of fresh embryos, or during the 30 days after collection, in the case of embryos subject to a mandatory storage for at least 30 days in accordance with point II.1.1.2.  II.1.4. from the time of collection until 30 days thereafter or, in the case of fresh embryos until the day of their dispatch to Great Britain, they were stored on premises situated in an area of at least 10 km radius centred on them, on which according to official findings there was no occurrence of foot-and-mouth disease, vesicular stomatitis, Rift Valley fever, contagious bovine pleuropneumonia or lumpy skin disease.  II.1.5. were collected from the donor females, which:  II.1.5.1. were located, during the 30 days immediately prior to collection, on premises situated in an area of at least 10 km radius centred on them, on which, according to official findings, there was no occurrence of foot-and-mouth disease, bluetongue, epizootic haemorrhagic disease, vesicular stomatitis, Rift Valley fever, contagious bovine pleuropneumonia or lumpy skin disease;  II.1.5.2. showed no clinical signs of disease on the day of collection;  II.1.5.3. spent the six months immediately prior to collection within the territory of the exporting country in no more than two herds:   * which, according to official findings, were free from tuberculosis during that time, * which, according to official findings, were free from brucellosis during that time, * which were free from enzootic bovine leukosis or in which no bovine animal showed clinical signs of enzootic bovine leukosis during the previous three years, * in which no bovine animal showed clinical signs of infectious bovine rhinotracheitis/infectious pustular vulvo-vaginitis during the previous 12 months.   II.1.6. The embryos to be exported were conceived by artificial insemination using semen coming from semen collection or storage centres approved for the collection, processing and/or storage of semen by the competent authority of a third country or part thereof listed in Annex I to Implementing Decision 2011/630/EU(4) or by the competent authority of a Great Britain. | | |
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|  | **AUSTRALIA** | **In vivo-derived bovine embryos** | |
|  | II. Health Information | ~~II.a.~~ ~~Certificate reference No~~ | II.b. |
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| **Part II: Certification** | **Notes**  (\*) Those countries subject to the transitional import arrangements include: an EU member State; Liechtenstein; Norway and Switzerland.  References to European Union legislation within this certificate are references to direct EU legislation which has been retained in Great Britain (retained EU law as defined in the European Union (Withdrawal) Act 2018).  References to Great Britain in this certificate include Channel Islands and Isle of Man**.**  **Part I:**  Box I.6: *Person responsible for the load in Great Britain*: this box is to be filled in only if it is a certificate for transit commodity.  Box I.11: *Place of origin* shall correspond to the embryo collection team from which the embryos are dispatched to Great Britain and which is listed in accordance with Article 8(2) of Directive 89/556/EEC  Box I.22: *Number of packages* shall correspond to the number of containers.  Box I.23: Identification of container and seal number shall be indicated.  Box I.26: Fill in according to whether it is a transit or an import certificate.  Box I.27: Fill in according to whether it is a transit or an Import certificate.  Box I.28: *Species*: select amongst *‘Bos taurus’*, *‘Bison bison’* or *‘Bubalus bubalis’* as appropriate.  *Category: select ‘in vivo* derived embryos’.  *Donor identity* shall correspond to the official Identification of the animal.  *Date of collection* shall be indicated in the following format: [dd.mm](http://dd.mm).yyyy  *Approval number of the team*: shall correspond to the embryo collection team by which the embryos were collected, processed and stored; and listed in accordance with Article 8(2) of Directive 89/556/EEC  **Part II:**   1. Delete as appropriate. 2. Only third countries listed in Annex 1 to Decision 2006/168/EC. 3. Only embryo collection teams listed in accordance with Article 8(2) of Directive 89/556/EEC   - the signature and the stamp must be in a different colour to that of the printing. | | |
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| **Approved Embryo Team Veterinarian**  Name (in capital letters):  Qualification and title:  Date:  Signature: .................................................................... | | |

**I.28. Identification of the commodities**

**ATTACHMENT TO GREAT BRITAIN, CHANNEL ISLANDS AND ISLE OF MAN HEALTH CERTIFICATE**

~~Certificate reference No:~~

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Species**  **(Scientific name)** | **Breed** | **Category** | **Donor Identity** | **Collection date**  **(Date of freezing)** | **Quantity** | **Approval number of the team** |
| Bos Taurus / Bos indicus | XXXX | *in vivo derived embryos* |  |  |  | xxx(input your GB team approval no.) |
|  |  |  |  |  |  |  |