Name and Addre	ess of Exporter		Name and Address of I	mporter		
AUSTRALIA			NEW ZEALAND			
			Import Permit Nº			
Description of Animal Reproductive Material						
<u>Number</u>	Kind (Species and type; eg bovine semen)	Condition (Fresh/Frozen) Identification (str		Identification (straw numbers, packing list)		
	BOVINE EMBRYOS	FROZEN	STRAWS	SEE ATTACHED		

I, Dr, after due enquiry, declare that:

1. Animal Health Declaration

1.1. Australia is free from bovine brucellosis (B. abortus and B. melitensis), bovine herpes virus 1.1 and 1.2a, bovine viral diarrhoea virus 2, contagious bovine pleuropneumonia, foot-and-mouth disease (without vaccination), lumpy skin disease, Rift Valley fever and bovine tuberculosis (Mycobacterium bovis).

2. Embryo Collection, Processing and Storage

- 2.1. Embryos were collected, washed, processed, stored and traceability maintained under the supervision of an approved embryo collection team veterinarian and in accordance with current recommendations of the OIE Code and the current IETS manual and the other specified requirements in this veterinary certificate.
- 2.2. All straws were sealed, and clearly and permanently marked to identify the donor and the date(s) of freezing. The markings conform to international standards of the International Committee for Animal Recording (ICAR) and the IETS Manual. *If a code is used for this information, its decipher instructions accompany the consignment.
- 2.3 The embryos have only been stored and transported with germplasm that has been collected and processed in accordance with the OIE Code.
- 2.4 The embryos have only been held in a storage place approved by the Competent Authority of the exporting country until the time of export.

3. Donors

- 3.1. Were born and raised in Australia (or New Zealand).
- 3.2. The embryo donors were resident in the embryo collection herd for at least 28 days prior to embryo collection for export to New Zealand. While resident with the collection herd, the herd was not subject to veterinary restrictions for organisms managed in this veterinary certificate.
- 3.3. The donor animals were examined by the government approved embryo team veterinarian on the day of collection and there was no evidence of clinical signs of OIE listed diseases transmissible in germplasm.

4. Laboratory testing

- 4.1. All testing was performed in a National Association of Testing Authorities (NATA) accredited laboratory (if applicable).
- 4.2. All laboratory samples required by this veterinary certificate have been collected, processed, and stored in accordance with the OIE's recommendations or as described in Approved Diagnostic Tests, Vaccines, Treatments and Post-Arrival Testing Laboratories for Animal Import Health Standards, MPI-STD-TVTL, found here https://www.mpi.govt.nz/dmsdocument/2040/
- 4.3. All diagnostic test(s) that are required have been approved by MPI for that purpose, administered according to manufacturer's instruction and documented in MPI-STD-TVTL.

5. SPECIFIC REQUIREMENTS FOR IDENTIFIED RISK ORGANISMS

5.1 Coxiella burnetii (Q-fever)

(*Delete non applicable)

- 5.1.1. The donor has never been confirmed positive for Q fever; AND EITHER:
- 5.1.2 Donors were subjected to a serological test listed in MPI-STD-TVTL for Q fever, on a sample collected between 21 and 120 days after each germplasm collection for export to New Zealand, with negative results; **OR***
- 5.1.3 A sample of embryos/oocytes, collection fluids and/or washing fluids from each germplasm collection for export to New Zealand was tested for Q fever with a test listed in MPI-STD-TVTL, with negative results; **OR***
- 5.1.4 Within the 6 month period before or after germplasm collection for New Zealand, but before export, the embryo collection herd was tested for Q fever, using a test listed in MPI-STD-TVTL, with negative results. The Q fever test must be:
 - a) performed on either the whole herd or a random sample of at least 60 animals (whichever is the lesser number); **AND**

b) the herd was isolated for the period between embryo collection and diagnostic sampling.

5.2 Mycoplasma bovis

(*Delete non applicable)

- 5.2.1. Collection and processing of embryos was in accordance with the recommendations of the OIE Code, except for:
 - a) The embryos were subjected to the protocol described in the IETS Manual: tylosin (200 μg/mL) incubation at 37°C in the antibiotic treatment for a minimum of 4 hours after being washed 10 times; OR*
 - b) The embryos were subjected to another MPI approved method of processing, listed in MPI-STD-TVTL; **OR***
 - c) The embryo donor was subjected to a test for M. bovis listed in MPI-STD-TVTL, with negative results; **OR***
 - d) Each embryo collection for export to New Zealand was tested with a validated test for M. bovis listed in MPI-STD-TVTL, with negative results.

5.3 Leptospira interrogans serovar hardjoprajitno (leptospirosis)

(*Delete non applicable)

- 5.3.1. Antibiotics must be added to germplasm in accordance with MPI-STD-TVTL; OR*
- 5.3.2 The donor must be serologically tested in accordance with MPI-STD-TVTL.

6. Storage and transport

(*Delete non applicable)

- 6.1 The transport container in which the embryos are to be transported to New Zealand is new* or disinfected* and is free of contamination. The disinfectant used, its active chemical and date of disinfection is recorded in Attachment 1 of this zoosanitary certificate.
- 6.2 All transport containers in which the embryos are to be transported to New Zealand, was sealed either by the Australian government approved embryo team veterinarian or an official veterinarian, using tamper-evident seals that are positioned to ensure that no embryos can be added after the transport container has been sealed.

*Where the embryos are transferred from one transport container to another:

- a) Date of transfer _
- b) Name of approved collection centre/herd ______
- c) Reason for transfer _
- d) Name of veterinarian involved in the transfer _____

Signature (pdf. doc only)

Date

Transport container:			New or di	New or disinfected: Disinfectant used: Active chemical: Date of disinfection:									
			Disinfecta										
			Active che										
			Date of di										
Female donor in	formation		÷										
Name Donor ID		Breed	DOB	Country of Birth		Name of Owner				Address of Owner			
Embryo informa	tion												
Female donor	Date/s of	Straw	ID	No. of	Name & Address of Embryo Collection Herd/Centre								
ID	collection			straws									
Test information													
		Collection perioc consignment		Mycoplasma bovis		ovis	Leptospirosis			Q fever			
Female donor ID	Date of entry i Embryo Collection Herd/Centre	Collection period	Collection period end	Test sampling date	Test type	Result	Test sampling date	Test type	Result	Test sampling date	Test type	Result	