

GREAT BRITAIN, CHANNEL ISLANDS AND ISLE OF MAN

Pet health certificate for the non-commercial movement to Great Britain, C cats or ferrets in accordance with Regulation (EU) No 576/2013

注意 代理人がこの様式を使う場合は削除する箇所を変更する必要があります。

COUNTRY: JAPAN

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

	1				191	anus a	nd Isle of	iviaii	1	
	I.1. Consignor			I.2 Certificate reference number						
	Name 飼い主の氏名			動物検疫所記入欄						
	Address 飼い主の日本の住所			I.3. Consigne	е					
				Name f	詞い主の	の氏名				
					Address	Address 飼い主のイギリスの住所				
	Tel. 電話番号									
					Postal co	Postal code 郵便番号				
						Tel. 電話番号				
	I.4. Central competent authority				I.5. Country of	origin				
			-	OPESTRY	JAPAN	J				
Part I: Details of dispatched consignment	MINISTRY OF AGRICULTURE,FORESTRY & FISHERIES				JAI AN					
	I.6. Local competent authority				I.7. ISO Code	of cour	ntry of origi	n		
	ANIMAL QUAR		ERVIC	E	JP					
	NARITA BRANCH									
	I.8. Description of commodity				I.9. Commodity code (HS code)					
lispatc	DOG CAT どちらかを選んで不要な方を削除				010619					
ails of c	I.10. Quantity 頭数 I.11. Commodities			Commodities certi	tified for: Pets þ					
rt I: Det	I.12. Identification of the commodities									
Pa	Species (Scientific name)	Sex	[Colour	Breed		tification umber	Identification system [transponder/	Date of birth	
	,							tattoo (10)]		
	どちらかを選	性別		毛色	品種	マイ・	クロチッ	MICROCHIP	日/月/年	
	んで不要な方					プの	番号		の順で記入	
	を削除					L				
	DOG									
	(Canis lupus familiaris)									
	CAT									
	(Felis									
	silvestris									
	catus)									

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

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of Man of dogs, cats or ferrets in accordance with of Regulation (EU) **COUNTRY: JAPAN** No 576/2013

	II.	Health information	II.a. Certificate reference number
			動物検疫所記入欄
L			

Attestation of rabies vaccination and rabies antibody titration test

- 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 (6); and
 - (') either [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 (7), and the details of the current anti-rabies vaccination are provided in the table below:]
 - the animals described in Box 1.12 come from, or are scheduled to transit through a third sountry other than those listed in Annex II to Implementing Regulation (EU) No 577/2013 and a rabies antibody titration test (3), 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 (3) 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:]

Transponder or tattoo		Date of	Name and	Batch	Validity of vaccination [dd/mm/yyyy]		Date of the
Alphanumeric code of the animal	Date of implantation and/or reading (10) [dd/mm/yyyy]	vaccination [dd/mm/yyyy]	manufacturer of vaccine	number	From	То	[dd/mm/yyyy]
マイクロチップ 番号	マイクロチッ フを埋めた 日/月/年	狂犬病予防接種 日/月/年 (マイクロチップを埋めた日以降の日付であること)	狂犬病予防接種の製品名と製造会社名例 RABIES TC/MATSUKEN	狂犬病 予防のバッナンバー まロット	狂犬 病防接 租 /月 /年	狂病防種有期 利用 種の対限	日本から出発す るペットは 不要

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II.	Health information	II.a. Certificate reference number
		動物検疫所記入欄

Attestation of anti-parasite treatment

(') either [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 Echinococcus multilocularis and the details of the treatment carried out by the administering veterinarian in accordance with Article 6 of Delegated Regulation (EU) No 2018/772 (11) (12) (13) are provided in the table below.]

the dogs described in Box I.12 have not been treated against Echinococcus multilocularis (14).]

	Anti-echinococcus treatment		Administering veterinarian	
Transponder or tattoo number of the dog	Name and manufacturer of the product	Date [dd/mm/yyyy] and time of treatment [00:00]	Name in capitals, stamp and signature	
マイクロチップ番号	エキノコッカス 駆除の薬の名前	獣医師による駆虫薬 投与日時	獣医師の名前(ブロック体) スタンプと署名	
	と製造会社名	日/月/年【時間】		
		(入国の 24~120 時 間以内に実施)		

Notes

- This certificate is meant for dogs (Canis Lupus familiaris) cats (Felis silvestris Cetus) and ferrets (Mustela (a) putorius furo).
- (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

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

Part I:

Box I.3: Consignee: indicate Great Britain, Channel Islands and Isle of Man as destination.

Box I.12: Identification system: select of the following: transponder or tattoo.

Identification number: indicate the transponder or tattoo alphanumeric code.

Date of birth/breed as stated by the owner.

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II.	Health information	II.a. Certificate reference number
		動物検疫所記入欄

Part II:

- (1) Keep as appropriate.
- (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,
- (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.
- (4) Any revaccination must be considered a primary vaccination if it was not carried out within the period of validity of a previous vaccination.
- (5) The declaration referred to in point II.3.2 to be attached to the certificate complies with the format, layout and language requirements laid down in Parts 1 and 3 of Annex I to Implementing Regulation (EU) No 577/2013.
- (6) A certified copy of the identification and vaccination details of the animals concerned shall be attached to the certificate.
- (7) 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.
- (8) The rabies antibody titration test referred to in point II.3.1:
 - 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.

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.

- (9) 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.
- (10) 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.

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II.	Health information	II.a. Certificate reference number
		動物検疫所記入欄
(11)	The treatment against Echinococcus multilocular	ris referred to in point II.4 must:
		period of not more than 120 hours and not less than 24 try of the dogs into Great Britain, Channel Islands and
	pharmacologically active substances, which	which contains the appropriate dose of praziquantel or ch alone or in combination, have been proven to reduce all forms of <i>Echinococcus multilocularis</i> in the host species
(12)		document the details of a further treatment if administered to the scheduled entry into Great Britain, Channel Islands
Officia	al veterinarian/ Authorised veterinarian (delete as ap	propriate) 動物検疫所記入欄
Ì	Name (in capital letters):	Qualification and title:
		ANIMAL QUARANTINE OFFICER
	Address	ANIMAL QUARANTINE SERVICE
	Address	NARITA BRANCH
	Telephone: Date:	MINISTRY OF AGRICULTURE, FORESTRY & FISHERIES Signature:
	Stamp:	
Endors	sement by the competent authority (not necessary	when the certificate is signed by an official veterinarian)
	Name (in capital letters):	Qualification and title:
	Address	
	Telephone:	
	Date:	Signature:
	Stamp:	

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Explanatory notes for completing the health certificate

- (a) Where the certificate states that certain statements shall be kept as appropriate, statements which are not relevant may be crossed out and initialled and stamped by the official veterinarian, or completely deleted from the certificate.
- (b) The original of each certificate shall consist of a single sheet of paper, or, where more text is required it must be in such a form that all sheets of paper required are part of an integrated whole and indivisible.
- (c) The certificate shall be drawn up in English. It shall be completed in block letters in English.
- (d) If additional sheets of paper or supporting documents are attached to the certificate, those sheets of paper or document shall also be considered as forming part of the original of the certificate by the application of the signature and stamp of the official veterinarian, on each of the pages.
- (e) When the certificate, including additional sheets referred to in point (d), comprises more than one page, each page shall be numbered (page number of total number of pages) at the end of the page and shall bear at the top of each page the certificate reference number that has been designated by the competent authority.
- (f) The original of the certificate shall be issued by an official veterinarian of the country of dispatch or by an authorised veterinarian and subsequently endorsed by the competent authority of the country of dispatch shall ensure that rules and principles of certification equivalent to those laid down in Directive 96/93/EC are followed.
- (g) The colour of the signature shall be different from that of printing. This requirement also applies to stamps other than those embossed or watermarked.
- (h) The certificate reference number referred to in boxes I.2 and II.a shall be issued by the competent authority of the country of dispatch.

Written declaration referred to in Article 25(3) of of Regulation (EU) No 576/2013

Section A Model of declaration

I, the undersigned

飼い主の氏名

[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.]

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 than 5 days of his movement.

Animal health certificate number
輸出検査時に交付される輸出検疫証明書番号

During	the non-commercial movement, the above animals will remain under the responsibility of
⁽¹⁾ eithe	r[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: 申告書記入場所と日付

飼い主の署名年月日

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):

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	$1 \pm \alpha$	ヾ゙゙゙゙゙゙゠ヾ゚゚゚	
впи	\cdot 1 \pm 0		

⁽¹⁾ delete as appropriate.