Section 4: Additional sheet: Declaration by Transporter

To be completed in BLOCK letters DURING the course of the journey by the person(s) in charge of the animals

Actual Journey Itinerary

7.1 Full postal address, including postcode, of each rest, transfer and exit point.	7.2 Arrival		7.3 Departure		7.4 Length of stop (*hours*)	7.5 Stamp and Signature of control post operator/ veterinarian authorised by the competent authority (if relevant)
	Date	Time	Date	Time		

11. As the transporter, I hereby certify that the entries above are correct and I am aware that any incident during the journey that leads to animals death must be declared to the competent authority of the place of departure.

12. Transporter's name, signature and authorisation reference *(if multiple transporters all should complete this section)*

A COPY OF THE COMPLETED LOG (ALL SECTIONS) IS REQUIRED TO BE RETURNED TO WELFARE IN TRANSPORT, SPECIALIST SERVICE CENTRE – EXPORTS, HADRIAN HOUSE, WAVELL DRIVE, ROSEHILL INDUSTRIAL ESTATE, CARLISLE, CA1 2TB WITHIN 1 MONTH OF COMPLETION OF THE JOURNEY