

Animal and Plant Health Agency
Access to Information Team
Weybourne Building
Ground Floor
Woodham Lane
New Haw
Addlestone
Surrey
KT15 3NB

T 01932 341111 F 01932 357608

www.gov.uk/apha

{By Email}

Our Ref: ATIC0874

24 June 2016

Dear

PROVISION OF REQUESTED INFORMATION

Thank you for your request for information about live animal exports which we received on 31 May 2016. Your request has been handled under the Freedom of Information Act 2000.

The information you requested and our response is detailed below:

"Freedom of Information Request Live animal export shipment Wednesday 23/24 September 2015 via Ramsgate Port

Sir I am requesting under an FOI Request the following Information on Live animal shipments from the UK.

1. the APHA/WIT Journey Log reports including the Date/ time of first sheep loading and the location, county of the UK in which loading took place. I require this information for One Dutch/ Two UK registered tractor units and two Dutch Reg. Transporters as listed and in each case identifiable against the individually listed vehicles. In order that I am able to collate this information accurately against the correct vehicle listed, and or its trailer unit if one was attached.

A. DK 55 RMX

Please see attached Appendix 1 for the supervised loading report for the above vehicle, which includes date and time of the first sheep loaded at the location.

B. KX 11 AYG ----- OD-39-DD

Please see attached Appendix 2 for the supervised loading report for the above vehicle, which includes date and time of the first sheep loaded at the location.

C. BT- JD -75 ----- OK-16-YN"

Please see attached Appendix 3 for the supervised loading report for the above vehicle, which includes date and time of the first sheep loaded at the location.

The county of the United Kingdom in which the loading took place has been withheld in accordance with Section 38 (1) of the Freedom of Information Act.

Also other information has been redacted in the attached Appendices under Section 38 and Section 40(2) of the Freedom of Information Act (FOIA).

Section 38 refers to the exemption from the duty to provide information if it would, or would be likely to affect anyone's health or safety.

We recognise that there is a general presumption in favour of transparency and openness concerning our work, and providing the general public with the right to request access to information held by public authorities.

We also recognise that there is a public interest in disclosure of this specific information in order to increase this transparency and aid well-informed debates concerning the welfare and transportation of animals, and the individuals associated with them.

However, we feel that there is a stronger public interest in withholding the information as the full addresses, including the county of origin, the destination and/or rest stops, transporter details and individual names would identify further information and would, or would be likely to, endanger the health and safety of staff. This poses a substantial risk to the health and safety of individuals associated with the transportation of animals that would be of significant severity and is likely to occur in some cases. We consider this to be a significant factor in favour of maintaining the exemption.

APHA has balanced the real threat to the health and safety of individuals which disclosure of the requested information would be likely to cause, against the public interest arguments in favour of disclosure. In this instance the APHA does not consider that disclosing the information requested in order to inform public debate and to promote accountability and transparency would justify the risk to individuals' health and safety.

Section 40(2) refers to other people's personal information. Some of the information contained within the requested documents has been withheld under section 40(2) (third party personal data) of the FOIA as the information constitutes personal data relating to a third party. Section 40(2) of the FOIA provides that personal data relating to third parties is exempt information if disclosure would breach the Data Protection Act 1998 (DPA).

APHA consider that disclosure of this information is likely to breach the first data protection principle in Schedule 1 of the DPA, which relates to the fair and lawful processing of personal data, in two ways. First, disclosure would not constitute 'fair' processing of the personal data, second, disclosure would not satisfy any of the conditions for data processing set out in Schedule 2 to the DPA. Therefore, we have concluded that this information is exempt from disclosure under section 40(2) of the FOIA.

Information disclosed in response to this FOI request is releasable to the public. In keeping with the spirit and effect of the FOIs and the government's Transparency Agenda, this letter and the information disclosed to you may be placed on GOV.UK, together with any related information that will provide a key to its wider context. No information identifying you will be placed on the GOV.UK website.

I attach an Annex which explains the copyright that applies to the information being released to you and contact details should you be unhappy with the service you have received.

If you have any queries about this letter, please contact the Access to Information Team at the email address below or postal address at the top of this letter.

Yours sincerely

ACCESS TO INFORMATION TEAM

Email: enquiries@apha.gsi.gov.uk

Annex

Copyright

The information supplied to you is Crown copyright, unless otherwise stated, and is protected by the Copyright, Designs and Patents Act 1988. You are free to use it for your own purposes, and for the purposes of news reporting. You can find details on the arrangements for re-using Crown copyright information at:

http://www.nationalarchives.gov.uk/doc/open-government-licence/open-government

Information you receive which is **not** subject to Crown Copyright continues to be protected by the copyright of the person, or organisation, from which the information originated. You must ensure that you gain their permission before reproducing any third party (non Crown Copyright) information.

Complaints

If you are unhappy with the result of your request for information you may request an internal review within 40 working days of the date of this letter.

If you wish to request an internal review, please contact: The Access to Information Team at enquiries@apha.gsi.gov.uk or at the postal address at the top of this letter, who will arrange for an internal review of your case.

If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. Please note that generally the Information Commissioner cannot make a decision unless you have first exhausted APHA's own complaints procedure. The Information Commissioner can be contacted at:

Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

SENT 5/10/15

Council regulations EC No/ 1/2005 on the protection of animals during transport

GB JOURNEY LOG

During the journey the consignment of animals

AHDO Address

CENTRE FOR

INTERNATIONAL TRADE

CARLISLE

CA1 2TB



JL9693

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Postcode:				4.2 Arriv	ral - Date					
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5.1 Name of place, including por	stoode of		6.2 A	Arrival .	Dep	arture	(hours)	Authoris	ation referen	ce
each rest, transfer and exit poin			Date	Time	Date	Time		(if differe	ent to that at	1.)
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7. I, the organiser, hereby de abovementioned journey and	clare that I am r	esponsibi iitable am	angemer	its to safe	guard th	e		್ಷ ೧೯೩೦	6 E	
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	- Animal Hoalth	Divisions	al Office f	or the are	a					到
Please submit this form to th	e Anımaı mealin	אוטוטונייטן						i.	. ~	150

in which the journey will begin

	Section 2 - Place		of Danaghana
To be complet	ed in BLOCK letters by th		
1. Name and full postal address o departure:	of the keeper at the place of	2. Full postal address o	f the place of departure:
Postcode:			estcode:
3. Date and Time of first animal loading 21/9//5 21: 30	4. Number of animals loaded 238	DUSS 13	
6. I, the keeper of the animals at animals. According to my knowle facilities and procedures for han	-dee of the time of icading its	rdance with the provision	n present at the loading of the als were fit for transport and the as of Regulation (EC) No. 1/2005
7. Signature of the keeper at t	he place of departure:		Date: 23/9//5
8. Add	litional Checks by an O	fficial Veterinarian/	Inspector
9. Name and full address of Vet	erinarian/Inspector:		
	Postcode	e: 	
Comments			
~ ·			
10. I hereby declare that I have knowledge, at the time of departure provisions of Council Regu	arture, the animals were fit for t	pading of the animals me transport and the transpo	ntioned above. According to my ort practices were in accordance with
11. Signature of Inspector:			Official Stamp
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Section 3 - Place of Destination

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	erinarian, of the charmed as	on 5 – Anomaly report r

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/IT7 (Rev. 08/11)

PROTECT - Personal

Section 4 – Declaration by Transporter

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

		Act	ual Jou	rney iti	nerary			
Place of departure (full postal a	ddress)	•		2. Destina	ion (full po:	stal addres:	s)	
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Postcode:				/)6	16 UM	Postco		
3. Departure – date and time			val – date	and time		1	al journey duration اب	(hours)
23/9//5 23.60 6. Air or Sea Stage details		1 W44	91/2	, y	70		<u></u>	
6.1 Shipping Company/Airline	6.2 Port/Ai	rport of D	eparture		arture time		/Airport of arrival	6.5 Arrival time
30 hua		CAN10	vrival		76 parture	Colp	i S 7.5 Stamp and S	ignature of control
7.1 Full postal address, including of each rest, transfer and exit	it point				Time	Length of stop		or/ veterinarian the competent
		Date	Time	Date	ime	(hours)		(if relevant)
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8. Reason for any difference be	tween actual	and prop	osed itine	rary/other	observation	IS	<u> </u>	
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9. Number and reason for anim	nal injuries ar	nd/or deat	hs during	the journe	у			
								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
10. Driver's name, signature	and certifica	te of con	npetence	reference	(if multiple	drivers all	should complete th	is section)
						15-5	w incident during th	re journey that leads
11. As the transporter, I hereby to animals death must be declared	y certify that	the entries	s above an authority (e correct a of the plac	and I am av e of departu	vare that ar ure.	iy incident daring ti	ie journey mariedo.
12. Transporter's name, sign	anturn and a	uthorisat	ion refere	nce (if mu	ıltiple transı	oorters all s	hould complete thi	s section)
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THE JOUR	NEY BEG	AN WIT	HIN 1 N	ONTH (OF COMP	PLETION	OF THE JOUR	NEY

Sec	ction 5 – A	Anomaly Report			
This section is for recording any r letters. Once completed a copy shou	non-comp ıld be sen	liance found during the transport. Use t to the AHVLA office at the address at	BLOCK Section 1		
 Name, Title and Full Postal Address of persoreport: 	on making th	e 1.1 Name of Transporter			
		1.2 Transporter's Authorisation Reference			
Postcode:		1.3 Organiser's reference for this journey log Section 1 of the form)	(from		
Place and Member State where non-complia observed	ance was	3. Date and Time when non-compliance was	observed		
4. Non-compliance (s) with Cou	ncil Regulation No 1/2005 observed			
	Tick		Tick		
4.1 Fitness for Transport		4.6 Space Allowances			
4.2 Means of Transport		4.7 Transporter's authorisation			
4.3 Transport Practices	sport Practices 4.8 Driver Certificate of Competence				
4.4 Journey Time Limits		4.9 Journey Log Records			
4.5 Additional Provisions for Long Journeys		4.10 Other			
I hereby declare that I have checked the co- compliances with Council Regulation No. 1/20 detailed in this report.	nsignment of 05 on the pr	the above mentioned animals and have observed otection of animals during transport and related op	the non- erations		
6. Date and Time:	,	7. Signature of the declarant:			
		<u> </u>			

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PROTECT - Personal

Council Regulation EC No 1/2005 on the protection of animals during transport. JOURNEY LOG	Animal Heelth office address Centre for International Trade and Hadrian House						
During the journey the consignment of animals MUST be accompanied by THIS journey log							
1.1 Oldstysels issues sixt on bours and							
	Telephone (Incl. STD code) Fax: (Incl. STD code) Ordaniser's Transporter Authorisation Reference (If applicable):						
2. Total expected journey duration (hours) 19 hours							
3.1 Ptace of departure (full postel address) 4.1	Destination (full postal address)						
Postcode:	Postcode:						
4-in and lime	2 Annval - date and time 23/09/2015 20:00hrs.						
5.1 Species (tick relevant boxes) 5. Pigs Sheep Cattle Goets 5.	2 Number of animals 5.3. Purpose of export 50 Eneeding 4. Estimated Weight of enimals (kg) Production/Staughter						
Approximate Age (If not adult)	6800 kg. Other 5. Total Space for animals (m²) If other please describe:						
23/09/20 14:08	23/09/ 16:00 2 Hours.						
Carried Transfer (MD 112) (1) ('''-'	2016						
Chinalas Countais/Airiae	Departure time Port/Airport of arrival Arrival time 13:00 hours.						
Mil/ Inline Remodate.	09:00 hours. Calais 13:00 (rous). Animal Health of the States (office use only)						
7. I, the organiser, hereby declare that I am responsible for the organisation of the abovementioned journey and I have made sullable organisation of the abovementioned journey and I have made sullable arrangements to subgreat the welfare of the animals throughout the arrangements to subgreat the provisions of Council Regulation (EC) No journey in accordance with the provisions of Council Regulation (EC) No journey in accordance with the transporters named to the log each hold an over 8 hour long journey Transporter Authors. 8. Organiser's signature:							
Date Organiser's Journey Log Reference							
21/09/2015 21/09/2015 Please submit this form to: Welfare In Transport, Specialist Service Centre – Exports, Hadrian House, Wavell Drive, Rosehill Industrial Estate, Carlisle CA1 2TB							

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To be complet	Section 2— Place ed in BLOCK letters by the		of Departure
Name and full postal address of departure:	of the keeper at the place of	2. Full postal address of the	e place of departure:
Postcode:		Postco	ode:
Date and Time of first animal loading	Number of animals loaded	5. Registration and Vehicle	Approval Certificate reference
13- 17	415	od 39	dd.
I, the keeper of the animals at animals. According to my knowle facilities and procedures for hand on the protection of animals during	dge, at the time of loading the Iling the animals were in accor	above mentioned animals wirdance with the provisions of	ere fit for transport and the
7. Signature of the keeper at th	e place of departure:		Date:
		23-(4-15
8,Addi	tional Checks by an Of	ilcial Veterinarian/Insp	ector
9. Name and full address of Vete	rinarian/Inspector: Postcode:		
Comments N/A			
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10. I hereby declare that I have of knowledge, at the time of departu the provisions of Council Regulat	re, the animals were fit for tra	ling of the animals mentione nsport and the transport prac	d above. According to my ctices were in accordance with
11. Signature of Inspector:		191	Official Stamp
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Date: 23 09 (1	5	1	AMBOON ST

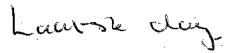
To be completed in BL0	Section 3 - Place OCK letters by either the KE	EPER at th	re Place of Destin	ation or the OFFICIAL
Name and Full Address of the place of destination/exit—	VETERINARIAN at the Keeper/Offi cial Veterinaria n a ein t.			of Destination/Ch eaking
Postc 3. Date and Time of Check				
Date 24 - 9 - 0		Time	152	
4. Ch	ecks:Performed:		4.5	e of the Checks
4.1 Transporter: Authorisation reference				
4.2 Driver:				
Certificate of Competence ref 4.3 Registration of Vehicle:	4	_		
Vehicle Approval Certificate re	<u> </u>		2	
4.4 Average space allowance	per animal (m²)			
4.5 Journey log records and jo	ourney time limits	οK		
If any non – complia	nce boxes are ticked Sect	tion 5 – A	nomaly report m	ust be completed
Total Checked	4.6.Ánit Unfit (U)		ead (D)	Fit (F)
415	_	-	-	415
consignment of animals. Acco	he place of destination/Official Verding to my knowledge, at the time competent authorities must be in nimals are discovered.	e of the che	eck the above-mentio	ned findings were
7. Signature of the Keeper/C	official Veterinarian at the place	of destination	o <u>n / exit point (</u> with of	ficial stamp)
	ice of Destination/OFFICIA			

Section 4 - Declaration by Transporter								
To be completed in l	3LOCK					f the jou	rney by the p	erson(s) in
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Postcode:	,						code:	//
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6. Air or Sea Stage details			<i>{</i>	/1 			· · · · · · · · · · · · · · · · · · ·	
6.1 Shipping Company/Aithae	6.2 Rort/A	import of D ^^ \$ स्ट्र			arture time 3 <i>ೌಂ</i>		الاAirport of arrival اکسے	6.5 Arrival time
7.1 Full postal address including of each rest transfer and exit	postcode,	:7 a 7	(prival:		sparture	7.4 Length	-7.5 Stamp and S	ignature/of control- or/ veterinarian
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o. Notice to any unicidino servi	oon doldar.	ina propo		, yroanor c				
9. Number and reason for animal	injuries and	l/or deaths	during th	e journey				
10. Driver's name, signature and	certificate	of comp	etence re	fofanca /	if multiple (drivers all s	hould complete this	section)
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11. As the transporter, i hereby co to animals death must be declared	rmy mar me i to the com	petent au	bove are o thority of th	correct an he place o	d I am awa of departure	ire that any e.	incident during the	journey that leads
12. Transport me, signatu	re and auti	norisation	referenc	e (if multi	ple transpo	rters all sh	ould complete this s	ection)
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Se	ction 5 -	Anomaly Report	(A)-
This section is for recording any letters. Once completed a copy sho	non-com uld be se	pliance found during the transport. Use B ent to the AHVLA office at the address at S	LOCK ection
Name, Title and Full Postal Address of pers report:	on making	the 1.1 Name of Transporter	222
		1.2 Transporter's Authorisation Reference	
Postcode:		1.3 Organiser's reference for this journey log (fro Section 1 of the form)	om
Place and Member State where non-compliant	ance was	Date and Time when non-compliance was ob-	
observed		The same and the s	erveu
4. Non-compliance	s) with Co	uncil Regulation No 1/2005 observed	
4.1 Fitness for Transport	Tick	4.6 Space Allowances	Tick
4.2 Means of Transport			
4.3 Transport Practices		4.7 Transporter's authorisation	<u> </u>
4.4 Journey Time Limits		4.8 Driver Certificate of Competence	
4.5 Additional Provisions for Long Journeys		4.9 Journey Log Records	
4.11. Remarks		4.10 Other	
 I hereby declare that I have checked the conscompliances with Council Regulation No. 1/2005 detailed in this report. 	signment of 5 on the pro	the above mentioned animals and have observed the stection of animals during transport and related operation	non- ons
6. Date and Time:		7. Signature of the declarant:	

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Council Regulation EC No of animals du JOURN	1/2005 on thing transport EY LOG	ne protection rt.	1.	addr	ikh office ess ternational	‡ anir	nalhealth
During the fourney the	consignme	nt of animals	. Wavell	l Drive	2TB		9701
MUST be accompanie	ed by THIS I	ourney rog	<u> </u>				
TOPIC COMPANIES FOR BLOCK						101276	
1.1 Organiser's name and full post	el address:	1.2	Neme of	person ir	charge of the	formal	
					TD code)	Pax: fincl. ST	
Postcod		ļ L	Organisa	ra Trans	porter Author	sation Referen	ce (if applicable):
2. Total expected journey duration	(hours) 19 ho						
3.1 Place of departure (full postal	e(fdress)	4.1	Destinet	on (full p	oslai addrasa)		France.
Parker.					Post	code:	
D.O. Chambura data and time	Postcode: 4.2 Arrivet – date and time 23/09/2015 20:00hrs.						
5.1 Species (tick relevant boxes)		5,2	Number	of anima	ia.	<u> </u>	ose of export
	tile 🔲 Goat		50				reeding
	—·:	' L	i. Estimat	ad Welg	d elements to the	_	roduction/Slaughter
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Calais Port,France.			23/09/ 1 2015	5,00	Hour.		
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					<u> </u>		
							-
							About Walter Programme
			E Maria				
	Port/Airport of C		eparture i	表对抗性的原则	Part/Airpor	t of entival	Arrival time
Shipping Company/Airline	_		9:00 hou		Calais		13:00 hours.
M.V.Jolina. 7. I, the organiser, hereby decis	Ramegale.		9.00 100	,	nimal Health	office stamp	(Office use only)
7. I, the organiser, referry decision organisation of the abovements arrangements to safeguard the journey in accordance with the 1/2003. I have confirmed that the hold an over 8 hour long journe 8. Organiser's signature:	med journey and welfare of the ar provisions of Col le transporters h	nimels throughout Pegult	able the (6) No		F 23	115	NAIA
						Celtifesde(5) n	ferences
21/09/2015		y Log Reference			.GB.2015.0	022081	
Please submit this form t	o: Welfare in	Transport, Spe	cielist Se	ervice (entre – Exp	orts, Hadria	n House,
E through Chambers and	Wavell Driv	e, Roseiill Ind	ustrial E	<u>state, C</u>	ariisie CA1	<u> </u>	

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	Section 2 – Plac	ce of Departure
To be comple	ted in BLOCK letters by	the KEEPER at the place of Departure
Name and full postal address departure:	of the keeper at the place of	2. Full postal address of the place of departure:
Gopartaro.		
Postcode:		Postcode:
3. Date and Time of first	4. Number of animals	
animal loading 23 105115	loaded	BTJD75
1445	514	
6. I, the keeper of the animals at	the place of departure, hereb	y declare that I have been present at the loading of the
facilities and procedures for hand on the protection of animals durin	Xing the animals were in acco	ordance with the provisions of Regulation (EC) No. 1/2005
7. Signature of the beauty of the	parture:	Date:
		23-9-15
Name and full address of Vete		IICIAI Veterinanan/Inspector
o. Name and fail address of vete	mianan/inspector:	
	Postcode:	Postcode: animals 5. Registration and Vehicle Approvar Certificate reference BTJD 7-5 eparture, hereby declare that I have been present at the loading of the e of loading the above mentioned animals were fit for transport and the lis were in accordance with the provisions of Regulation (EC) No. 1/2005 d related operations. parture: Date: Date: When an Official Veterinarian/Inspector tor: Postcode: HE LORRIE FILLED WITH SHEEP T LOAD CERTIFIED FOR WELFARE proved the loading of the animals mentioned above. According to my were fit for transport and the transport practices were in accordance with were fit for transport and the transport practices were in accordance with were fit for transport and the transport practices were in accordance with were fit for transport and the transport practices were in accordance with
Comments		
LAST PEN	IN THE LOW	2RIE FILLED WITH SHEEP
from the	WA NEXT LOAD	CERTIFIED FOR WELFARE
reasons		
10. I hereby declare that I have ch	ecked and approved the load	ing of the animals mentioned above. According to my
knowledge, at the time of departul the provisions of Council Regulation	e, the animals were fit for trar on (EC) No. 1/2005.	isport and the transport practices were in accordance with
11. Signature of Inspector:		Carring at Stamp
- Ga ar makaatar		(Springer)
Date: 23/09/15		` Dresvico

	Section 3	Place of Desti	nation	
To be completed in BLC	CK letters by either t VETERINAR	he KEEPER at th IAN at an EU exit	ie Place of Destir Point	ation or the OFFICIAL
Name and Full Address of the place of destination/exit part	he Keeper/Official Markin	1 _	and Member State	of Destination/Clacking
the prace of destination/exit-se	na t.	Peint		
Postco	de:			
3. Date and Time of Check				
Date 74-	9-15	Time	15	· O U
4. Che	cks Performed			e of the Checks
4.1 Transporter:			- ag compliance	5.2 Non-Compliance
Authorisation reference				
4.2 Driver:			Ğ	
Certificate of Competence refer	rence		<u> </u>	
4.3 Registration of Vehicle:	ok is y			
Vehicle Approval Certificate ref	erence	·		!
4.4 Average space allowance p	per anima r (m.)			
105/ 010			Ø	
4.5 Journey log records and jou	rney time limits			
		OV		
lf any non – complian	ce boxes are ticked	Section 5 – An	omaly report m	ust he completed
	A-1474/C		and the second	TO TO SERVICE AND THE SERVICE
T-1-10511		Animals	4	
Total Checked	Unfit (U)	Dea	d (D)	Fit (F)
514			-	50
S. I, keeper of the animals at the consignment of animals. Accord ecorded. I am aware that the conay be and each time dead animals.	ling to my knowledge, at i ompetent authorities mus mals are discovered.	the time of the chec t be informed as so	k the above-mention on as possible of an	ned findings were by non-compliance there
'. Signature of the Keeper/Off	icial Veterinarian at the	place of destination	Lexit-solm with off	iciał stamp)
The KEEPER at the Place	e of Destination/OF the journey log (ex	FICIAL VETERI	NARIAN at an e	xit point is required
		-raamy scould	· +/ ioi aliee ye	u 1 3

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PROTECT - Personal

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Section 4 - 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 Place of departure (full nosta Destination (full postal address) Postcode: Postcode: 3. Departure - date and time 4. Arrival – date and time etc. 5. Total joughey duration (hours) 23/4/05 1630 6. Air or Sea Stage details 6.1 Shipping Company/Airline port of Departure 6.4 Port/Altrent of arrival 6.3 Departure time 6.5 Arrival time 7.1 Full postal address, including postcode 23 30 Calcus 7,3 Departure 7.2YA\rival 7.5 Stamp and Signature of control of each rest, transfer and exit point Length post operator/ veterinarian of stop Date Time authorised by the competent (hours) authority (if relevant) ١٥٤سو Of 00 8. Reason for any difference between actual and proposed itinerary/other observations 9. Number and reason for animal injuries and/or deaths during the journey 10. Driver's name signature and certificate of competence reference (if multiple drivers all should complete this section) ect and I am aware that any incident during the journey that leads declared to the competent authority of the place of departure. re and authorisation reference (if multiple transporters all should complete this section) PLETED LOG (ALL SECTIONS) IS REQUIRED TO BE RETURNED TO THE ETERINARY LABORATORIES AGENCY OFFICE FOR THE AREA IN WHICH BEGAN WITHIN 1 MONTH OF COMPLETION OF THE JOURNEY Page 4 of 7 PROTECT - Personal

Sr.	ection 5 -	Anomaly Report	
This section is for recording any letters. Once completed a copy sho	non-com ould be se	pliance found during the transport. Use E ent to the AHVLA office at the address at t	ILOCK Section
Name, Title and Full Postal Address of pers report:	son making	the 1.1 Name of Transporter	
		1.2 Transporter's Authorisation Reference	
Destando		1.3 Organiser's reference for this journey log (f Section 1 of the form)	гот
Postcode: 2. Place and Member State where non-compli	iance was	Date and Time when non-compliance was of	hserved
observed			
4. Non-compliance	(s) with Cot	uncil Regulation No 1/2005 observed	
.1 Fitness for Transport	I T	4.6 Space Allowances	Tick
.2 Means of Transport	 	4.7 Transporter's authorisation	+ ot =
.3 Transport Practices		4.8 Driver Certificate of Competence	
4 Journey Time Limits		4.9 Journey Log Records	
5 Additional Provisions for Long Journeys		4.10 Other	
I hereby declare that I have checked the cons mpliances with Council Regulation No. 1/2005 tailed in this report.	signment of 5 on the pro	the above mentioned animals and have observed the tection of animals during transport and related operati	non- ions
Date and Time:		7. Signature of the declarant:	
		Oignature of the declarant:	