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

JOURNEY LOG

During the journey the consignment of animals MUST be accompanied by THIS journey log

APHA office address for submissions and returns of Journey Logs

Welfare in Transport Team
Centre for International Trade
Eden Bridge House
Lowther Street
Carlisle
CA3 8DX



Animal & Plant Health Agency

1.1	Organiser's Name and address (*)(b)			1.2 Name of the	person i	n charge of the journey			
					1.3 Telephone/Fa	X			
2	Total expected duration	hours/days)	64:30 b	nurs		0.0			
3.1	Place and country of de	eparture	04.0011	Julio.	4.1 Place and col	untry of	destination		
							France.		
					3				
	×								
3.2	Date	3.3 Time			4.2 Date		4.3 Time		
	24/09/2016	03:30	· · · · · ·	1	26/09/2016	difference of	20:00		
5.1	Species Ovines	5.2. Numb 450	er of anin	iais	5.3 Veterinary certificate(s) number(s) INTRA.GB.2016.0024706.				
	Neaned YES.	Unweaned				100			
5.4	Estimated total weight 15800	ment (in l	kg):	5.5 Total space p	rovided	for the consignment (in m²):			
6	List of scheduled resting, transfer or exit points:				JOO Lawath	6.4	Transporter's name and		
6.1	Name of the place whe are to be rested, or trai		6.2 A	rrival	6.3 Length (in hours)		authorisation No (if different		
	(including exit points)	ilololi od	Date	·Time	( , ,		from the organiser)		
			24/09/ 2016	06:45	45 mins				
			24/09/		100	a			
			2016 09:30		2016 09:3		15 mins		
		24/09/ 2016 13:45		1:45 mins	Mid J	ourney Break			
			25/09/ 2016	10:30	15 mins				
	France.		25/09/ 2016	11:10	24 hours		CENTRAL OPS		
							0 9 NOV 2011		
	A. A	**.					RECEIVED		
7.	I, the organiser, hereb responsible for the org abovementioned journ arrangements to safe animals throughout th the provisions of Cour 1/2005	ganisation of the ney and I have guard the welf e journey in a	he made su are of the ccordance	e with			al atamp		

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J	Section 2: Place of Departure							
1.	Keeper at the place of departure – Name and address (if different from the organiser mentioned in section (1)(a):							
2.	Place and Member State of departure (b):							
3.	Date and time of first animal   4.   Number of animals loaded (b):   5.   Identification of the means of transport:     Column   1							
6.	I, the keeper of the animals at the place of departure, hereby declare that I have been present at the loading of the animals. According to my knowledge, at the time of loading the above mentioned animals were fit for transport and the facilities and procedures for handling the animals were in accordance with the provisions of Regulation (EC) No 1/2005 on the protection of animals during transport and related operations.							
7.	Signature of the keeper at the place of departure:							
8.	Additional checks at departure:							
9.	Veterinarian at the place of departure (name and address):							
10.	I, Veterinarian, hereby declare that I have checked and approved the loading of the animals mentioned above. According to my knowledge, at the time of departure, the animals were fit for transport and the means of transport and the transport practices were in accordance with the provisions of Council Regulation (EC) No 1/2005.							
11.	Signature of the Veterinarian:							

(a) (b)

	Section 3: Place of L	Jestination	
1.	Keeper at the place of destination/Official Veterinarian -	Name and address (3):	
			Frigne E ime of the check:
2.	Place and Member State of destination/Checking point (	3. Date and	ime of the check:
	FRANCE	0645	26/9/16
4.	Checks Performed:	5. Outcome	of the checks
		5.1. COMPLIANCE	5.2. RESER-VATION(S)
4.1	Transporter		
	Authorization number /b\		
4.2	Driver		
	Number of the certificate of competence	4	
4.3	Means of transport		
	Identification (°)		
4.4	Space allowances (0000)		
	Average space/animal in m <sup>2</sup> 0 · 2-4	LA LA	
4.5	Journey log records and journey time limits		
4.6	Animals (specify the number for each category)		
	Total checked U Unfit	D Dead ①	F Fit 415
ON	E DEAD AT CONTROL POST		
6.	I, the keeper of the animals at the place of destination/or checked this consignment of animals. According my kn abovementioned findings were recorded. I am aware the soon as possible of any reservation there may be and	owledge, at the time of the ch at the competent authorities r	eck the nust be informed as
7.	Signature of the keeper at the place of destination/Offi	cial Veterinarian (with officia	stamp):
(a) (b) (c)	Delete as appropriate. If different from Section 1. If different from Section 2.		

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44.4	Dy Ele
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	1
A	DOLLOGO

To be completed by the driver during the course of the journey and to be available to the competent authorities of the place of departure within one month of the date of

arrival at the place of destination.							
Actual itinerary - r	rary - resting, transfer or exit points	ansfer o	r exit poi	nts			į
	Arri	Arrival	Depa	Departure			
Place and address	Date	Time	Date	Time	Length of stop	Reason	uo
	5/1/8	1430	74191	2419 1430 2419/ 1530	(hour	Mid-jumpy brank	brank
	2519	11.40	25/9 11.40 29/9/ 11.50	11.50		Patrophy From	Facm Figur
	250%	134	1609	A. i. 20	गार्	Rend a Dell	
Reason for any difference between actual and proposed itinerary/other observations:	ations:					Date and time of arrival at the place of destination: $\frac{1}{2} \frac{1}{2} \frac{1}{2$	arrival at the on: $C \in S S$ .
Number and reason for animal injuries and/or deaths during the journey:					/		

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 animal's death must be declared to the competent authorities of the place of departure.

Transporter's name, authorisation num

nature

Date and place: i6/i6/i6

DRIVER(S)'s name and signature.

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Section 5 - Specimen Anomaly Report No.	

A copy of the anomaly report accompanied by a copy of Section 1 of the journey log shall be transmitted to the competent authority.

compo	tent authority.					
1.	DECLARANT'S name, title and address:					
				Date and time when the anomaly was		
2.	Place and Member State where the anomaly was observed:		3.	observed:	5	
				10005		
4.	Type of anomaly (ies) pursuant to Council Regulat	tion (E	C) No 1	/2005:		
4,1.	Fitness for transport (1)		4.6.	Space allowances (6)		
4,1.	Titless for transport ( )					
4.2.	Means of transport (²)		4.7.	Transporter's authorisation (7)		
4.3.	Transport practices (3)		4.8.	Driver certificate of competence (8)		
	1		4.9.	Journey log records		
4.4.	Journey time limits (4)		4.5.			
4.5.	Additional provisions for long journeys (5)		4.10.	Other		
4.11.	Remarks:					
7,11.	·					
5.	I hereby declare that I have checked the consignment of the abovementioned animals and have expressed the reservations detailed in this report concerning compliance with the provisions of Council Regulation (EC)					
	No 1/2005 on the protection of animals during train	nsport	and rela	ated operations Signature of the declarant:		
6.	Date and time of the declaration to competent authority:		1'	Signature of the decidrant.		
( <sup>1</sup> )	Annex I, Chapter I and Chapter VI, paragraph 1.9.					
(²) (³)	Annex I, Chapters II and IV. Annex I, Chapter III.					
( <sup>4</sup> ) ( <sup>5</sup> )	Annex I, Chapter V. Annex I, Chapter VI.					
(6)	Annex I, Chapter VII.					
(B)	Article 6. Article 6(5).					

The Animal and Plant Health Agency is an Executive Agency of the Department for Environment, Food and Rural Affairs working to safeguard animal and plant health for the benefit of people, the environment and the economy.