

DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS SCOTTISH GOVERNMENT - RURAL DIRECTORATE WELSH ASSEMBLY GOVERNMENT - DEPARTMENT FOR RURAL AFFAIRS DEPARTMENT OF AGRICULTURE AND RURAL DEVELOPMENT NORTHERN IRELAND

EXPORT OF FRESH POULTRY MEAT TO GRENADA HEALTH CERTIFICATE EXPORTING COUNTRY: UNITED KINGDOM FOR COMPLETION BY: OFFICIAL VETERINARIAN

No: .....

201

I. Identification of the products

- a) Species of poultry
- b) Type of products:
- c) Number of packages:
- d) Net weight:
- e) Shipping marks
  - (i) Container No:
  - (ii) Seal No:

## II. Origin of the products

a) Name, address and veterinary approval number of the slaughterhouse

b) Name, address and veterinary approval number of the cutting plant

c) Name, address and approval number of the cold store

## III. Destination of the products

a) Name and address of exporter:

1807EHC (Cleared 06/04/2010)

- b) Name and address of consignee:
- c) Means of transportation:

d) Proposed date and port of shipment:

## IV. Health Information

I, the undersigned, certify that the fresh poultry meat described overleaf
meets the following requirements:

- a) the said poultry meat was derived from poultry which were hatched and neared only in the United Kingdom;
- b) the poultry from which the meat was derived were subjected to preslaughter health inspection and post mortem inspection under official veterinary supervision and found fit for human consumption in accordance with Regulations currently in force in the United Kingdom;
- c) the poultry were slaughtered and the meat prepared in an establishment approved to export to the EC;
- d) the birds from which the poultry meat was derived did not originate from holdings in an area which is under restriction due to an outbreak of Newcastle Disease or Fowl Plague;
- e) the poultry meat did not come into contact with any poultry meat which was not produced in accordance with requirements for intra-Community trade;
- f) the poultry meat is suitable for human consumption in the United Kingdom.

Address.....

Signed ......RCVS

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Name in block letters.....

Official Veterinarian

Date....