



DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS  
SCOTTISH EXECUTIVE ENVIRONMENT AND RURAL AFFAIRS DEPARTMENT  
NATIONAL ASSEMBLY FOR WALES  
DEPARTMENT OF AGRICULTURE AND RURAL DEVELOPMENT NORTHERN IRELAND

No: .....

EXPORT OF DAY OLD CHICKS OF DOMESTIC FOWL TO MAURITIUS

SUPPORT HEALTH CERTIFICATE

I. Name and address of Official Veterinarian to whom this certificate must be returned as soon as possible:

II. Name and address of exporter:

III. Address of flock of origin:

IV. Date of export:

V. Health Information.

I, the undersigned, certify that the birds comprising the flock of origin meet the following requirements:

- a) there has been no history or clinical evidence of the following diseases on the premises of origin during the past 12 months: Newcastle disease (including velogenic, viscerotropic strains), fowl cholera, Salmonella pullorum (pullorum disease), Salmonella gallinarum (fowl typhoid), chicken infectious anaemia, paratyphoid infections (S. typhimurium and S. enteritidis), mycoplasmosis, infectious bronchitis, infectious laryngotracheitis, highly pathogenic avian influenza (fowl plague), egg drop syndrome (adenovirus 127), infectious bursal disease and reoviral arthritis;

- b) the flocks from which the day old chicks originate:
- (i) are not vaccinated for **highly pathogenic avian influenza**;
  - (ii) have not shown any clinical signs of **avian influenza** infection during the last 21 days immediately prior to consignment of the day old chicks;
- c) the flocks from which the day old chicks originate have been vaccinated for the following diseases as follows:  
(if necessary a separate schedule may be attached)

Disease	Date of vaccination	Manufacturer	Name of vaccine	Batch No:
Newcastle disease				
Infectious bronchitis				
Infectious bursal disease				
Reoviral arthritis				

- d) no new birds have been added to the flock(s) of origin within 30 days prior to despatch;

VI. This certificate is valid for 10 days

\* delete as appropriate

Stamp

Signed .....RCVS

Name in  
block letters .....

Flock Veterinarian

Date

Address .....

.....

Department for Environment, Food and Rural Affairs  
1A Page Street  
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