## 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



Section 1: Planning 1.2 Name of the person in charge of the journey Organiser's Name and address (\*)(\*) Telephone/Fax Total expected duration (hours/days) 104 hrs 15 mins 3.1 Place and country of departure Place and country of destination Spain 3.2 3.3 4.2 4.3 Time Time Date Date26/04/2018 20.00 4.15 01/05/2018 5.2. 5.1 Number of animals Veterinary certificate(s) number(s) Species 5.3 Bovine 200 INTRA.GB.2018.0010878& Weaned Unweaned x INTRA.GB.2018.0010966 Estimated total weight of the consignment (in kg): Total space provided for the consignment (in m<sup>2</sup>): 10000 30.0 30.0 32.0(92) List of scheduled resting, transfer or exit points: 6.1 Name of the place where animals 6.3 Length Transporter's name and 6.2 Arrival are to be rested, or transferred (in hours) authorisation No (if different Date Time (including exit points) from the organiser) 26/4 22.15 1hr 45mins 27/4 02.00 15min 03.30 31hr 30mins 27/4 Rest and feed 28/4 13.45 1hr45mins Rest and water and load 11.30 29/4 15min 29/4 12.15 25hrs Rest and feed and load 30/4 19.15 1hr Mid journey rest and water SA 01/5 5.15 destination I, the organiser, hereby declare that I am Official stamp responsible for the organisation of the abovementioned journey and I have made suitable arrangements to safeguard the welfare of the animals throughout the journey in accordance with the provisions of Council Regulation (EC) No 1/2005 TEDKIN 8. Signature of the organiser APHA Journey Log Reference JL12988 Organiser: see definition in Article 2(q) of Council Regulation (EC) No 1/2005

If the organiser is a transporter the authorisation number shall be specified.

	Section 2: Place of Departure							
1.	Keeper at the place of departure (1)(*):	– Name and address (if different from t	the organiser mentioned in section					
2.	Place and Member State of dena	arture ( <sup>b</sup> )·						
3.	Date and time of first animal loading (b):  26(4(18 17.00)	4. Number of animals loaded (b):	Identification of the means of transport:					
<ol> <li>7.</li> </ol>	of the animals. According to my transport and the facilities and pro-	e place of departure, hereby declare the knowledge, at the time of loading the all rocedures for handling the animals were protection of animals during transportace of departure:	bove mentioned animals were fit for e in accordance with the provisions of					
8.	Additional checks at departure:		Day Co.					
9.	Veterinarian at the place of depart	arture (name and address):						
10.	According to my knowledge, at the	nat I have checked and approved the loan he time of departure, the animals were lices were in accordance with the provision	fit for transport and the means of					

(b) If different from Section 1.

		Section 3: Pla	ce of Destinat	ion			
1.	Keeper at the place of	destination/Official Veterin	arian – Name	and addre			
2.	Place and Member St	ate of destination/Checking	point (°):	3.			
4.	Спескѕ Репогтеа:	5. Outc	5. Outcome of the checks				
				5.1. COMPLIA	NCE	5.2. RESER-VATION(S	
4.1	Transporter					_	
	Authorisation number	0024				Ш	
4.2	Driver  Number of the certification		44	8	-		
4.3	Means of transport  Identification (c)	Truck					
4.4	Space allowances  Average space/animal	q L in m <sup>2</sup>		<b>D</b>	/	0	
4.5	Journey log records ar	and journey time limits					
4.6	Animals (specify the nu	umber for each category)					
	Total checked	U Unfit	DI	Dead		F Fit	
6.	checked this consignment abovementioned finding	mals at the place of destina ent of animals. According m gs were recorded. I am away reservation there may be	y knowledge, re that the cor	at the time of the npetent authorities	check s mus	the st be informed as	
7.		r at the place of destination					
(a) (b) (c)	Delete as appropriate. If different from Section 1. If different from Section 2.						
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## Section 4: Declaration by the Transporter

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To be completed by the driver during arrival at the place of destination.	ng the course of the journey and to be avai	ilable to the	compete	ent autho	rities of the	place of departure	e within one month	of the date of
	Actual itinerary -	resting, to	ransfer o	r exit po	ints			
No.	Arrival Departure							
Place	e and address	Date	Time	Date	Time	Length of stop	Rea	son
		28/4	10:00	28/4	16:30	man a		
		28/4	14:00	1	15:30			
		1,	11:06	29/4	11:70			
		29/04	11"45	30/04	1145	24000	T-eed and	rest-
_		30/4	20:55	30/4	21:55			
			05:16	• • •	32			
Reason for any di	and proposed itinerary/other obser	vations:					Date and time of place of destinat	
VA.	w 000 de						71-4-18	5.10
Number and reas	d/or deaths during the journey:							
DRIVER(S)'s name and signature:						orisation number:	nimal's	००2 ५ death must be
As the transporter, I hereby certification declared to the competent author	fy that the entries above are correct and rities of the place of departure.	d I am awa	re tnat ai	iy incide	ant during	the journey that	to an and to	
Date and place: , 5 - (o	31-4-18							

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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.

1.	DECLARANT'S name, title and address:		1					
2.	Place and Member State where the anomaly was observed:		3.	Date and time when the anomaly was observed:				
4.	Type of anomaly (ies) pursuant to Council Reg	ulation (E	C) No 1	/2005:				
4.1.	Fitness for transport (1)		4.6.	Space allowances ( <sup>6</sup> )				
4.2.	Means of transport (²)		4.7.	Transporter's authorisation (7)				
4.3.	Transport practices (3)		4.8.	Driver certificate of competence (*)				
4.4.	Journey time limits (4)		4.9.	Journey log records				
4.5.	Additional provisions for long journeys (5)		4.10.	Other				
4.11.	Remarks:							
5.	I hereby declare that I have checked the consignate reservations detailed in this report concerning No 1/2005 on the protection of animals during the second	ing compl	iance w	ith the provisions of Council Regulation	essed on (EC)			
6.	Date and time of the declaration to competent authority:		7.	Signature of the declarant:				
<del>-</del>	Annex I, Chapter I and Chapter VI, paragraph 1.9. Annex I, Chapter III. Annex I, Chapter III. Annex I, Chapter VI. Annex I, Chapter VI. Annex I, Chapter VII. Article 6. Article 6(5).	ARIDA COME A	2					

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.

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