pr	During the journey animals MUST be a	s during tran NEY LOG y the consign	sport.	f	APHA office address and returns of Jo Welfare in Tran Centre for Interna Eden Bridge Lowther S Cartisl CA3 8D	sport Team ational Trade House Street e		Animal & Plant Health Agency
	William and	and a substant	Se	ection 1	: Planning			
1.1	Organiser's Name a	and address (*)(*)		1.2 Name of the	e person in	charge	of the journey
					1.3 Telephone/	Fax		
2	Total expected dura	tion (hours/days	s) 104 hr	s 15 mir	ns			
3.1	Place and country o	fdeparture		RW	4.1 Place and o Spain	country of de	stinati	on
3.2	Dat08/03/2018	3.3 Time 20.00			4.2 Date 13/03/2018			ime
5.1	Species Bovine Weaned	5.2. Num 200	ber of ani	imals	5.3 Veterinary certificate(s) INTRA.GB.2018.00062) number(s) 248&	
5.4		Unweaned ht of the consig		ı kg):	INTRA.GB.2 5.5 Total space 30.0 30.0 32	provided fo		nsignment (in m ²):
5	List of scheduled res	sting, transfer or	exit poin	its:				
5.1	Name of the place w are to be rested, or t (including exit points	here animals ransferred	- Kanada and a second	Arrival Time	6.3 Length (in hours)	au	thorisat	er's name and ion No (if different rganiser)
-		The second second	08/03	22.15	1hr 45mins	1/434	art.	1011
			09/03	02.00	15min	1.37		
			09/03	03.30	31hr 30mins	Rest an		
			10/03	13.45	1hr45mins	Rest an		
			11/03	11.30	15min	111		
			11/03	12.15	24hrs	Rest and	feed an	nd load
			12/03	18.15	1hr			and water
	SA		13/03	4.15	destination			
	I, the organiser, here responsible for the or abovementioned jour arrangements to safe animals throughout th the provisions of Cou 1/2005	ganisation of th ney and I have guard the welfa ne journey in ac	e made sui re of the cordance			OFFIC	TERM	
	Signature of the orga	niser			АРНА	Journey Lo JL12856	g Refer	rence
	Organ If the organiser is a trans	porter the authoris	ation numb	julation (E ber shall t	C) No 1/2005 be specified.			
-	(Rev. 03/16)		OFFICIAL-	CENCITI	VE			

_		Section 2: Place of Departure	AN A
1.	Keeper at the place of departur (1)(^a):	e – Name and address (if different from t	he organiser mentioned in section
2.	Place and Member State of dep	parture (^b):	and the second second
3.	Date and time of first animal loading (^b):	4. Number of animals loaded (^B):	5. Identification of the means of
8	13)18 21.00	101	transport:
6.	I, the keeper of the animals at to of the animals. According to my transport and the facilities and	the place of departure, hereby declare that y knowledge, at the time of loading the ab procedures for handling the animals were the protection of animals during transport	ove mentioned animals were fit for in accordance with the provisions of
7.	Signature of the keeper at the	place of departure:	
8.	Additional checks at departure	E	
9.	Veterinarian at the place of de	parture (name and address):	
10.	According to my knowledge, at	that I have checked and approved the loat the time of departure, the animals were f	fit for transport and the means of
	According to my knowledge, at		fit for transport and the means of
	According to my knowledge, at transport and the transport pra 1/2005.	the time of departure, the animals were find the provis	fit for transport and the means of
	According to my knowledge, all transport and the transport pra 1/2005. Signature of the Veterinarian: Keeper: see definition in Article 2(k)	the time of departure, the animals were find the provis	fit for transport and the means of
	According to my knowledge, all transport and the transport pra 1/2005. Signature of the Veterinarian: Keeper: see definition in Article 2(k)	the time of departure, the animals were find the provis	fit for transport and the means of
	According to my knowledge, all transport and the transport pra 1/2005. Signature of the Veterinarian: Keeper: see definition in Article 2(k)	the time of departure, the animals were find the provis	fit for transport and the means of
10.	According to my knowledge, all transport and the transport pra 1/2005. Signature of the Veterinarian: Keeper: see definition in Article 2(k)	the time of departure, the animals were find the provis	fit for transport and the means of
	According to my knowledge, all transport and the transport pra 1/2005. Signature of the Veterinarian: Keeper: see definition in Article 2(k)	the time of departure, the animals were factices were in accordance with the provis	fit for transport and the means of

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	Section 3: Place	of Destination	Staffic hat is	
1.	Keeper at the place of destination/Official Veterinari	an - Name and address (*).		
2.	Place and Member State of destination/Checking po	Dint (*): 3. Date and	time of the check:	
4,	Checks Performed:	5. Outcome	ome of the checks	
		5.1. COMPLIANCE	5.2. RESER-VATION(S	
4.1	Transporter	COMPERANCE	RESER-VATION(C	
10	Authorisation number (°) no Tree 1.0010			
4.2	Number of the certificate of competence 00 7			
4.3	Means of transport Truck			
	Identification (°)			
4.4	Space allowances q2			
	Average space/animal in m ²			
4.5	Journey log records and journey time limits			
4.6	Animals (specify the number for each category)			
	Total checked U Unfit	D Dead	F Fit	
6. 7.	I, the keeper of the animals at the place of destination checked this consignment of animals. According my abovementioned findings were recorded. I am aware soon as possible of any reservation there may be an Signature of the keeper at the place of destination/O	knowledge, at the time of the che that the competent authorities mid d each time dead animals are dia	ck the ust be informed as	
300	Delete as appropriate. If different from Section 1. If different from Section 2.			

Actual	itinerary - resting, to	ansfer o	r exit po	Ints		
Place and address	Arrival		Departure		Length of stop	Reason
	Date	Time	Date	Time	Lenger or stop	Nedsoli
	103	22.15	0/03	00.00		
	03	2 am	9/03	2-15		
	103	3-30	10/03	Tom		
	13	2pm	10/3	3pm		
	1/03	12:45	12/03	12.450	m zuhr	Feed and Rest
	103	8pm	12/03	9pm	lhr	
spain	13./03	4-30A	~			
eason for any difference between actual and proposed itinerary/o	other observations:		•			Date and time of arrival at the place of destination: 13/03/18 $4-30$
umber and reason for animal injuries and/or deaths during the jou	urney:		14-14		-	1.10/10 4 /
RIVER(S)'s name and signature:	1					
s the transporter, I hereby certify that the entries above are c eclared to the competent authorities of the place of departure	correct and I am awa	re that ar	iy incide	nt during	the journey that l	eads to animal's death must b
ate and place						Transporter' signatur

WIT07 (Rev. 03/16)

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-	Section 5 - Specim	en Anoma	aly Rep	ort No.	
A co com	ppy of the anomaly report accompanied by a cop petent authority.	y of Section	on 1 of t	he journey log shall be transmitted to	the
1.	DECLARANT'S name, title and address:				-
2.	Place and Member State where the anomaly	was	3.	Date and time when the anomaly	
	observed:			observed:	was
4.	Type of anomaly (ies) pursuant to Council Re	gulation (E	EC) No	1/2005:	
4.1.	Fitness for transport (1)		4.6.	Space allowances (*)	
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	
		the second second			
	Additional provisions for long journeys (^s) Remarks:		4.10.	Other	
4.11.	Remarks:	gnment of	the abo	vementioned animals and have exp	ressed
4.5. 4.11. 5.	Remarks:	gnment of	the abo	vementioned animals and have exp	ressed
4.11. 5.	Remarks: I hereby declare that I have checked the consist the reservations detailed in this report concern No 1/2005 on the protection of animals during Date and time of the declaration to competent	gnment of	the abo ance wi and relat	vementioned animals and have exp th the provisions of Council Regulat ted operations	ressed
4.11. 5.))))))))))))))))))))))))))))))))	Remarks: I hereby declare that I have checked the consist the reservations detailed in this report concern No 1/2005 on the protection of animals during Date and time of the declaration to competent authority: Annex I, Chapter I and Chapter VI, paragraph 1.9. Annex I, Chapter II and IV. Annex I, Chapter II. Annex I, Chapter VI. Annex I, Chapter VI.	gnment of ing compli transport a	the abc ance wi and rela 7.	vementioned an mals and have exp th the provisions of Council Regulat ed operations Signature of the declarant:	ion (EC