

## DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS THE SCOTTISH GOVERNMENT

## THE WELSH GOVERNMENT

## DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND RURAL AFFAIRS - NORTHERN IRELAND

No: .....

FOR COMPLETION BY	OFFICIAL VETERINARIAN	
I. Number and	identification of the birds	
Number	Species	Breed
II. Origin of t	he birds	
a) Name a	nd address of exporter:	
b) Addre	ss(es) of premises of origin or hatch	nery:
a) Nome a	nd address of owner:	
c) Name a	nd address of owner:	

## II. Origin of the birds

EXPORT OF DAY OLD CHICKS TO NEPAL

UNITED KINGDOM

HEALTH CERTIFICATE

EXPORTING COUNTRY:

- a) Name and address of exporter:
- b) Address(es) of premises of origin or hatchery:
- c) Name and address of owner:

III.	Desti	nation	٥f	+he	hirde
<b></b>	Desti	nation	OI	tne	Diras

	a) Name and address of consignee in Nepal:	
	b) Means of transportation:	
IV.	Health Information	
<b>5</b> +	I, the undersigned, certify that the birds described ab following requirements:	ove meet the
a)	The flocks of origin and the hatchery are located either (i) The United Kingdom (UK)*  or (ii) a region of the UK*  or (iii) a poultry compartment within the	
	which is officially free from highly pathogenic no influenza (HPNAI) according to the criteria of the	
b)	The flocks of origin and the hatchery are located either (i) The United Kingdom (UK)* or (ii) a region of the UK* or (iii) a poultry compartment within the	
	which is officially free from Newcastle disease as criteria of the OIE;	ccording to the
c)	the birds comprising the flock of origin have been insphealthy and free from clinical signs of infectious or cincluding avian influenza (fowl plague). Salmonella galtyphoid), tuberculosis and avian leukosis:	ected and found to be ontagious disease, linarum (fowl
d)	there has been no clinical history or clinical evidence typhoid, tuberculosis or avian leukosis in the flocks of during the past 6 months, or of chronic respiratory distinct the past 12 months;	f origin
e)	the flock(s) of origin and hatchery are members of a Go poultry health scheme and on the basis of regular test from Salmonella pullorum, Salmonella gallinarum and Myo	ng are considered free
v.	This certificate is valid for 15 days.	
Stamp	mp Signed	RCVS
	Name in block letters	
	Official Veterinarian	
Date	e Address	• • • • • • • • • • • • • • • • •