

Owner's Declaration and Veterinary Support Certificate for the export of Bovine semen to Argentina 6203EHC

May 2021



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APHA is an Executive Agency of the Department for Environment, Food and Rural Affairs and also works on behalf of the Scottish Government, Welsh Government and Food Standards Agency to safeguard animal and plant health for the benefit of people, the environment and the economy.

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Department for Environment, Food and Rural Affairs Scottish Government Welsh Government Department of Agriculture, Environment and Rural Affairs

*CPH number:	

Owner's Declarations and Veterinary Support Certificate

Part I: For Completion by the Owner/Agent of the Owner

1.	Name of owner:	(Block Capitals)
2.	Address of farm or organisation:	
3.	Address of holding of origin from which the bull(s) are to be moved:	
		•••••
	Holding No. (CPH):	
4.	Address of the quarantine / bovine semen collection centre to which the	ne bull(s) will be
	moved:	

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Declarations by the *Owner/ *Keeper of the Animals

I, being the *owner/ *keeper of the bull(s) listed in the attached schedule, hereby declare that:

Health Status of the Holding of Origin

To the best of my knowledge and belief, the following diseases have not been clinically diagnosed or reported on the above holding of origin for the 90 days prior to entry into the semen collection centre:

- i) Mycobacterium bovis (TB)
- ii) Brucellosis (abortus / melitensis / suis)
- iii) Enzootic Bovine Leucosis (EBL)
- iv) Infectious Bovine Rhinotracheitis / Infectious Pustular vulvovaginitis (IBR/IPV)
- v) Campylobacter foetus ssp venerealis
- vi) Trichomonas foetus

Signed	*Owner/	*Keeper
Name in block capitals		
Date		

*delete as appropriate

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Part II: Veterinary Support Certificate

l,		, the undersigned, certify that:
to the best of my knowled above are a true and corr	lge and belief, the owner's decret statement;	clarations at Part I paragraph
I have no knowledge of on the above holding, du		e diseases above being reported
3. This Veterinary Support C	ertificate is valid for 48 hours.	
Stamp	Signed:	RCVS
	Name in block letters:	Official Veterinarian
Date:		
	Fax No:	
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Schedule of Identification of Animals

Part II: Identification of Animals

Official individual identification	Breed	Age

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