DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS
SCOTTISH GOVERNMENT
WELSH GOVERNMENT
DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND RURAL AFFAIRS NORTHERN IRELAND

No: .....

EXPORT OF MEAT/MEAT PRODUCTS[1] TO GEORGIA

HEALTH CERTIFICATE

EXPORTING COUNTRY: UNITED KINGDOM

FOR COMPLETION BY: OFFICIAL VETERINARIAN

I Identification of consignment

(a) Animal species:

(b) Description of the products

(c) Type and number of packages

(d) Net and gross weight of consignment:

(e) Container/seal number OR alternative identification details, e.g. shipping marks, batch numbers or pallet numbers:

II Origin of products

***** (a) Name, address and official approval number of the slaughterhouse(s):

***** (b) Name, address and official approval number of the cutting premises:

[1] "Meat products" means processed products resulting from the processing of meat or from the further processing of such processed products, so that the cut surface shows that the product no longer has the characteristics of fresh meat. With the agreement of the importing country, meat products may also include the following commodities:

- Offal: fresh meat other than that of the carcase, including viscera and blood;
- Meat preparations: fresh meat, including meat that has been reduced to fragments, which has had foodstuffs, seasonings or additives added to it, e.g. sausages, burgers;
- Minced meat: boned meat that has been minced into fragments and contains less than 1% salt.

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***** (c) Name, address and official approval number of the processing premises:

***** (d) Name, address and official approval number of the cold store:

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III Destination of products

(a) Name and address of exporter

(b) Name and address of consignee

(c) Name and address of premises of despatch:

(d) Means of transportation (Name of ship, flight number, airport/port of departure):

IV Health Information

I, the undersigned Official Veterinarian, certify that the meat/meat products described above meet the following conditions:

(a) *(i) for export of bovine, ovine and caprine meat – the meat/meat products were derived from animals which, at the time of their slaughter, were resident in a territory that has been free from rinderpest and foot and mouth disease (FMD) for the past 12 months;

*(ii) for export of porcine meat – the meat/meat products were derived from animals which, at the time of their slaughter, were resident in a territory that has been free from rinderpest, FMD, African swine fever, swine vesicular disease and classical swine fever for the past 12 months;

(b) they originate from the United Kingdom and/or were legally imported into the United Kingdom;

(c) they were derived from animals that have not been slaughtered for the purpose of disease eradication or disease control;

(d) they were derived from animals that have been subjected to satisfactory ante-mortem and post-mortem inspection under veterinary supervision in an officially approved slaughterhouse and found fit for human consumption;

(e) the meat/meat products and/or the packaging thereof bears an official mark indicating that they have been obtained, processed, packaged, labelled and stored in officially approved establishments in accordance with relevant food hygiene regulations and are fit for human consumption;

(f) they do not contain levels exceeding permitted limits of veterinary medicinal products and residues and comply with microbiological criteria in accordance with food law and instructions given by the competent authorities of the United Kingdom;

(g) they have been stored in an hygienic manner so as to prevent contamination with agents known to cause infectious disease of humans or animals;

(h) the transport vehicles or containers and the loading conditions of this consignment meet the conditions laid down in the relevant hygiene regulations;

*** IN THE CASE OF BEEF PRODUCTS:**

*(i) the bovine meat and/or meat product meets the conditions laid down in the current WOAH Terrestrial Animal Health Code Chapter on bovine spongiform encephalopathy (BSE).

*** Delete if not applicable**

Official Stamp

Signed ..... RCVS
Official Veterinarian

.....
Name in block letters

Date .....

Address .....
.....

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