



**DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND
RURAL AFFAIRS (NORTHERN IRELAND)**

**EXPORT OF BOVINE SEMEN (COLLECTED, PROCESSED AND STORED AFTER
31/12/2004) TO GREAT BRITAIN**

EXPORT HEALTH CERTIFICATE

Health Certificate No:

EXPORTING COUNTRY: NORTHERN IRELAND

FOR COMPLETION BY: OFFICIAL VETERINARIAN

PART 1:

I. Information concerning the donor bull(s)

Breed	Date of Birth	Name and ear mark

II. Information concerning the semen

- a) Date(s) of collection:
- b) Number of doses and identification mark(s):
- c) Number and seal number(s) of containers:

III. Place of collection of the semen:

- a) Name and address of approved semen collection centre:

- b) Registration number:

IV. Origin of the semen

- a) Name and address of consignor:

- b) Place of loading if different to IV a) above:

- c) Means of transportation:

- d) Name and Address of local Divisional Veterinary Office:

V. Destination of the semen

- a) Name and address of consignee:

- b) Place of destination if different to V a) above:

VI. Health Information

I, the undersigned Official Veterinarian, certify that:

- (a) the semen described above was collected, processed and stored under conditions which comply with the standards laid down in Council Directive 88/407/EEC;
- (b) the semen described above was sent to the place of loading in a sealed container under conditions which comply with Directive 88/407/EEC;
- (c) the semen described above was collected from bulls:
 - (i) *which either have not been vaccinated against foot-and-mouth disease within 12 months prior to collection;
 - or
 - (ii) *which have been vaccinated against foot-and-mouth disease less than 12 months and more than 30 days prior to collection, in which case 5% (with a minimum of five straws) of each collection have been submitted to a virus isolation test for foot- and-mouth disease in an approved laboratory _____
(name of laboratory) with negative results;
- (d) the frozen semen was stored in approved conditions for a minimum period of 30 days immediately following collection.

* Delete as appropriate

Health Certificate No

OV Stamp

Signed

Official Veterinarian

Name (BLOCK CAPITALS).....

Address.....

.....

Date

This certificate is valid for 10 days from the date of certification

NOTES

- (a) A separate certificate must be issued for each consignment of semen.
- (b) The original of this certificate must accompany the consignment to the place of destination.

V3: 2113EHC (NI) APPLICATION