

Part I: Description of consignment presented

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| I.2. CHED Reference | I.3. Local reference | | I.1. Consignor/Exporter Name Address Country ISO Code |
| | I.4. Control Authority | | |
| | I.5. Control Authority Code | | |
| I.6. Consignee/Importer Name Address Country ISO Code | | | I.7. Place of Destination Name Address Activity ID Country ISO Code |
| I.8. Operator responsible for the consignment Name Address Country ISO Code | | | I.9. Accompanying documents Type Number Date of Issue Country and place of issue Commercial documentary references |
| I.10. Prior notification Date Time | | | |
| I.13. Means of transport | | | I.11. Country of Origin ISO Code |
| Mode | International transport document | Identification | I.12. Region of Origin |
| | | | |
| | | | |
| | | | |
| I.15. Establishment of origin Name Address Approval Number Country ISO Code | | | |
| I.16. Transport conditions Ambient <input type="checkbox"/> Chilled <input type="checkbox"/> | | | |
| I.17. Container No / Seal No | | | |
| I.18. Certified as or for Other <input type="checkbox"/> Feedstuff <input type="checkbox"/> Human Consumption <input type="checkbox"/> | | | |
| I.19. Conformity of the goods Conforming <input type="checkbox"/> Non-conforming <input type="checkbox"/> | | | |
| I.20. For transhipment 3rd country <input type="checkbox"/> BCP ISO Code TRACES unit No. | | | |
| I.22. For transit 3rd country <input type="checkbox"/> Exit BCP ISO Code TRACES unit No. | | | |
| I.23. For internal market <input type="checkbox"/> | | | |
| I.23. For private import <input type="checkbox"/> | | | |
| I.25. For re-entry <input type="checkbox"/> | | | |
| I.24. For non conforming goods <input type="checkbox"/> | | | |
| Customs warehouse | <input type="checkbox"/> | Registered No. | <input type="checkbox"/> |
| Free zone | <input type="checkbox"/> | Registered No. | |
| Ship supplier | <input type="checkbox"/> | Registered No. | |
| Ship | <input type="checkbox"/> | Name | |
| | | Port | |
| I.27. Means of transport after BCP/storage | | | I.28. Transporter |
| Mode | International transport document | Identification | Name Address Country ISO Code |
| | | | |
| | | | |
| | | | |
| I.29. Date of departure | | | |

Part I: Description of consignment presented

I.31. Description of consignment

| Commodity | Species | Batch number | Quantity | Package count | Net weight | Establishment of Origin | Product type | Final consumer |
|-----------|---------|--------------|----------|---------------|------------|-------------------------|--------------|----------------|
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|--------------------------------|----------------|------------------------|--------------------------|
| I.32. Total number of packages | I.33. Quantity | I.34. Total Net Weight | I.34. Total Gross Weight |
|--------------------------------|----------------|------------------------|--------------------------|

I.35 Declaration

I, the undersigned operator responsible for the consignment detailed above, certify that to the best of my knowledge and belief the statements made in Part I of this document are true and complete, and I agree to comply with the requirements of Regulation (EU) 2017/625 on official controls, including payment for official controls, as well as for re-dispatching consignments, quarantine or isolation of animals, or costs of euthanasia and disposal where necessary.

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| Date of signature | Name of Signatory | Signature |
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| Part II: Decision on consignment | II.3. Documentary Check | | II.4. Identity Check | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | |
| | EU Standard | Satisfactory <input type="checkbox"/> | Not satisfactory <input type="checkbox"/> | Satisfactory <input type="checkbox"/> | Not satisfactory <input type="checkbox"/> | Full check <input type="checkbox"/> | | |
| | II.5. Physical Check | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | II.6 Laboratory Tests | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | Satisfactory <input type="checkbox"/> | | Not satisfactory <input type="checkbox"/> | | Test | | | |
| | | | | | Random <input type="checkbox"/> | Suspicion <input type="checkbox"/> | | |
| | | | | | Results Pending <input type="checkbox"/> | Satisfactory <input type="checkbox"/> | Not satisfactory <input type="checkbox"/> | |
| | II.7. Welfare Check | | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | |
| | Satisfactory <input type="checkbox"/> | | | | Not satisfactory <input type="checkbox"/> | | | |
| | II.9 Acceptable for transhipment | | <input type="checkbox"/> | | | | | |
| | 3rd country | | | | ISO Code | | | |
| | BCP | | | | TRACES unit No. | | | |
| | II.11 Acceptable for transit | | <input type="checkbox"/> | | | | | |
| | 3rd country | | | | ISO Code | | | |
| | Exit BCP | | | | TRACES unit No. | | | |
| | II.13 Acceptable for monitoring | | <input type="checkbox"/> | | | | | |
| | 1. Entry monitoring | | | | <input type="checkbox"/> | | | |
| | 2. Re-entry monitoring | | | | <input type="checkbox"/> | | | |
| II.14 Acceptable for non-conforming goods | | <input type="checkbox"/> | | | | | | |
| 1. Customs warehouse | | | | <input type="checkbox"/> | | | | |
| 2. Free zone or Free warehouse | | | | <input type="checkbox"/> | | | | |
| 3. Ship supplier | | | | <input type="checkbox"/> | | | | |
| 4. Ship | | | | <input type="checkbox"/> | | | | |
| II.16 NOT ACCEPTABLE | | <input type="checkbox"/> | | | | | | |
| 1. Destruction | | | | <input type="checkbox"/> | | | | |
| 2. Appropriate treatments | | | | <input type="checkbox"/> | | | | |
| 3. Re-dispatching | | | | <input type="checkbox"/> | | | | |
| 4. Others | | | | <input type="checkbox"/> | | | | |
| Date/time | | | | | | | | |
| II.17 Reason for Refusal | | | | | | | | |
| 1. Documentary: Missing certificate | | | | <input type="checkbox"/> | | | | |
| 2. Documentary: Absence of original certificate | | | | <input type="checkbox"/> | | | | |
| 3. Documentary: Wrong certificate model | | | | <input type="checkbox"/> | | | | |
| 4. Documentary: Invalid dates | | | | <input type="checkbox"/> | | | | |
| 5. Documentary: Missing signature/stamp | | | | <input type="checkbox"/> | | | | |
| 6. Documentary: Invalid authority | | | | <input type="checkbox"/> | | | | |
| 7. Documentary: Missing laboratory report | | | | <input type="checkbox"/> | | | | |
| 8. Origin: Non approved country | | | | <input type="checkbox"/> | | | | |
| 9. Origin: Non approved region | | | | <input type="checkbox"/> | | | | |
| 10. Origin: Non approved establishment | | | | <input type="checkbox"/> | | | | |
| 11. Physical: Prohibited species | | | | <input type="checkbox"/> | | | | |
| 12. Physical: Hygiene failure | | | | <input type="checkbox"/> | | | | |
| 13. Physical: Invasive species | | | | <input type="checkbox"/> | | | | |
| 14. Physical: Cold chain breakdown | | | | <input type="checkbox"/> | | | | |
| 15. Physical: Temperature failure | | | | <input type="checkbox"/> | | | | |
| 16. Physical: Sensory check failure | | | | <input type="checkbox"/> | | | | |
| 17. Physical: Presence of parasites | | | | <input type="checkbox"/> | | | | |
| 18. Identity: Label missing | | | | <input type="checkbox"/> | | | | |
| 19. Identity: Label/Document mismatch | | | | <input type="checkbox"/> | | | | |
| 20. Identity: Means of transport mismatch | | | | <input type="checkbox"/> | | | | |
| 21. Identity: Official seal number mismatch | | | | <input type="checkbox"/> | | | | |
| 22. Identity: Species mismatch | | | | <input type="checkbox"/> | | | | |
| 23. Laboratory: Chemical contamination | | | | <input type="checkbox"/> | | | | |
| 24. Laboratory: Microbiological contamination | | | | <input type="checkbox"/> | | | | |
| 25. Laboratory: Veterinary drug | | | | <input type="checkbox"/> | | | | |
| 26. Laboratory: Irradiation | | | | <input type="checkbox"/> | | | | |
| 27. Laboratory: Non-compliant additives | | | | <input type="checkbox"/> | | | | |
| 28. Laboratory: Genetically modified organisms (GMO) | | | | <input type="checkbox"/> | | | | |
| 29. Other: Others | | | | <input type="checkbox"/> | | | | |

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| Part II: Decision on consignment | II.20 Identification of BCP | II.21 Certifying officer |
| | BCP Unit number | Stamp I, the undersigned official inspector for the entry point, certify that the phytosanitary checks on the consignment have been carried out in accordance with EU requirements. Full name Date of signature |
| | | Signature |