

|   |                                  |                                  |   |  |                                  |  |
|---|----------------------------------|----------------------------------|---|--|----------------------------------|--|
| Part I: Description of consignment  | I.1. Consignor                   |                                  | I.2. IMSOC reference                      |  | I.2.a. Local reference           |  |
|   | Name                             |                                  |   |  | I.3. Central Competent Authority |  |
|   | Address                          |                                  |   |  |                                  |  |
|   | Country                          |                                  | ISO Code                                  |  | I.4. Local Competent Authority   |  |
|   | I.5. Consignee                   |                                  |   | I.6. Operator conducting assembly operations independently of an establishment |                                  |  |
|   | Name                             |                                  |   | Name   |                                  |  |
|   | Address                          |                                  |   | Address  |                                  |  |
|   | Country                          |                                  |   | Approval Number  |                                  |  |
|   |                                  |                                  |   | Country  |                                  |  |
|   | ISO Code                         |                                  |   | ISO Code   |                                  |  |
| I.7. Country of origin  |                                  |                                  | ISO Code                                  |  | I.9. Country of destination      |  |
|   |                                  |                                  |   |  | ISO Code                         |  |
| I.8. Region of origin   |                                  |                                  | Code                                      |  | I.10. Region of destination      |  |
|   |                                  |                                  |   |  | Code                             |  |
| I.11. Place of dispatch   |                                  |                                  | I.12. Place of destination                |  |                                  |  |
| Name  |                                  |                                  | Name                                      |  |                                  |  |
| Address   |                                  |                                  | Address                                   |  |                                  |  |
| Approval Number   |                                  |                                  | Approval Number                           |  |                                  |  |
| Country   |                                  |                                  | Country                                   |  |                                  |  |
| ISO Code  |                                  |                                  | ISO Code                                  |  |                                  |  |
| I.13. Place of loading  |                                  |                                  | I.14. Date and time of departure          |  |                                  |  |
| Name  |                                  |                                  |   |  |                                  |  |
| Address   |                                  |                                  |   |  |                                  |  |
| Approval Number   |                                  |                                  |   |  |                                  |  |
| Country   |                                  |                                  |   |  |                                  |  |
| ISO Code  |                                  |                                  |   |  |                                  |  |
| I.15. Means of Transport  |                                  |                                  | I.16. Transporter                         |  |                                  |  |
| Mode  | International transport document | Identification                   | Name                                      |  |                                  |  |
|   |                                  |                                  | Address                                   |  |                                  |  |
|   |                                  |                                  | Activity ID                               |  |                                  |  |
|   |                                  |                                  | Country                                   |  |                                  |  |
|   |                                  |                                  | ISO Code                                  |  |                                  |  |
|   |                                  |                                  | I.17. Accompanying documents              |  |                                  |  |
|   |                                  |                                  | Accompanying document reference           |  |                                  |  |
|   |                                  |                                  | Date of issue                             |  |                                  |  |
|   |                                  |                                  | Country                                   |  |                                  |  |
|   |                                  |                                  | Place of issue                            |  |                                  |  |
| I.18. Transport conditions  |                                  |                                  |   |  |                                  |  |
| Frozen <input type="checkbox"/>   |                                  | Ambient <input type="checkbox"/> |   | Chilled <input type="checkbox"/>   |                                  |  |
| I.19. Container No / Seal No  |                                  |                                  |   |  |                                  |  |
| I.20. Certified as  |                                  |                                  |   |  |                                  |  |
| Products for human consumption <input type="checkbox"/>   |                                  |                                  |   |  |                                  |  |
| I.21. For transit through a third country <input type="checkbox"/>  |                                  |                                  |   |  |                                  |  |
| Third country   |                                  | ISO Code                         |   |  |                                  |  |
| Exit point  |                                  | BCP code                         |   |  |                                  |  |
| Entry point   |                                  | BCP code                         |   |  |                                  |  |
| I.22. For transit through Member State(s) <input type="checkbox"/>  |                                  |                                  | I.23. For export <input type="checkbox"/> |  |                                  |  |
| Member State  |                                  | ISO Code                         |   | Third country  |                                  |  |
|   |                                  |                                  |   | ISO Code   |                                  |  |
|   |                                  |                                  |   | Exit point   |                                  |  |
|   |                                  |                                  |   | BCP code   |                                  |  |
| I.24. Estimated journey time  |                                  |                                  | I.25. Journey Log                         |  |                                  |  |
| I.26. Total number of packages  |                                  | I.27. Total quantity             |   | I.28. Total gross weight   |                                  |  |
|   |                                  |                                  |   | I.29. Total space foreseen for the consignment                                 |                                  |  |
| I.30. Description of consignment  |                                  |                                  |   |  |                                  |  |
| <b>1. 05 PRODUCTS OF ANIMAL ORIGIN, NOT ELSEWHERE SPECIFIED OR INCLUDED</b>   |                                  |                                  |   |  |                                  |  |
| <b>0504</b> Guts, bladders and stomachs of animals (other than fish), whole and pieces thereof, fresh, chilled, frozen, salted, in brine, dried or smoked     |                                  |                                  |   |  |                                  |  |
| <b>050400</b> Guts, bladders and stomachs of animals (other than fish), whole and pieces thereof, fresh, chilled, frozen, salted, in brine, dried or smoked   |                                  |                                  |   |  |                                  |  |
| <b>05040000</b> Guts, bladders and stomachs of animals (other than fish), whole and pieces thereof, fresh, chilled, frozen, salted, in brine, dried or smoked |                                  |                                  |   |  |                                  |  |
| #1.   | Commodity                        | Identification system            | Identification Number                     | Package count  | Quantity                         |  |
|   | Species                          |                                  |   |  |                                  |  |

|  |   |  |  |  |  |                           |                         |                   |           |       |
|--|---|--|--|--|--|---------------------------|-------------------------|-------------------|-----------|-------|
| <b>Part II: Certification</b>            | II. Health information  |  |  |  |  |                           |                         |                   |           |       |
|  | <p>I, the undersigned official veterinarian/official inspector, hereby certify that the goods described in Part I comply with the following animal health and/or food safety requirement(s) of the non-EU country, beyond EU legislation:</p>   |  |  |  |  |                           |                         |                   |           |       |
|  | <p>Notes:</p> <ul style="list-style-type: none"> <li>- Certification of non-EU country requirements in relation to exports from Member States of the European Union to non-EU countries</li> <li>- The exporting food business operator (consignee in the present certificate) has provided a confirmation from the competent authority of the exporting Member State, that the mentioned animal health and/or food safety requirement(s) are additional to EU legal requirements and are needed to issue an certificate for the export to a non-EU country.</li> <li>- Boxes I.6, I.7., I.14, I.15, I.16, I.17, I.21, I.26, I.27, I.28, I.29 and I.30 may be left empty</li> </ul> |  |  |  |  |                           |                         |                   |           |       |
|  | <table style="width: 100%; border: none;"> <tr> <td colspan="2" style="border: none;">Certifying Officer/Official veterinarian</td> </tr> <tr> <td style="border: none; width: 50%;">Name (in capital letters)</td> <td style="border: none; width: 50%;">Qualification and title</td> </tr> <tr> <td style="border: none;">Date of signature</td> <td style="border: none;">Signature</td> </tr> <tr> <td style="border: none;">Stamp</td> <td style="border: none;"></td> </tr> </table>  |  |  | Certifying Officer/Official veterinarian |  | Name (in capital letters) | Qualification and title | Date of signature | Signature | Stamp |
| Certifying Officer/Official veterinarian |   |  |  |  |  |                           |                         |                   |           |       |
| Name (in capital letters)                | Qualification and title   |  |  |  |  |                           |                         |                   |           |       |
| Date of signature                        | Signature   |  |  |  |  |                           |                         |                   |           |       |
| Stamp                                    |   |  |  |  |  |                           |                         |                   |           |       |