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|--|----------------------------------|----------------------------------|---|--|----------------------------------|--|
| Part I: Description of consignment | I.1. Consignor | | I.2. IMSOC reference | | I.2.a. Local reference | |
| | Name | | | | I.3. Central Competent Authority | |
| | Address | | | | I.4. Local Competent Authority | |
| | Country | | ISO Code | | | |
| | I.5. Consignee | | | I.6. Operator conducting assembly operations independently of an establishment | | |
| | Name | | | Name | | |
| | Address | | | Address | | |
| | Country | | | Approval Number | | |
| | | | | Country | | |
| | | | | 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 | | | |
| | | | Commercial document reference | | | |
| | | | Date of issue | | | |
| | | | Country | | | |
| | | | Place of issue | | | |
| I.18. Transport conditions | | | | | | |
| Ambient <input type="checkbox"/> | | Chilled <input type="checkbox"/> | | Frozen <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 | | | Third country | | | |
| ISO Code | | | ISO Code | | | |
| | | | Exit point | | | |
| | | | BCP code | | | |
| I.26. Total number of packages | | I.28. Total net weight | | I.28. Total gross weight | | |
| I.30. Description of consignment | | | | | | |
| Commodity | Species | Manufacturing plant | Net weight | Package count | | |
| | | | | | | |

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|---|---|--|---------------------------|----------------|-------------------|-----------|-------|--|
| Part II: Certification | II. Health information | | | | | | | |
| | <p>Products in accordance with Commission Implementing Regulation (EU) 2021/934 laying down special control measures for classical swine fever.</p> <p>either ◦ [Fresh meat and meat products, including casings, obtained from porcine animals kept in a restricted zone I in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Fresh meat and meat products, including casings, obtained from porcine animals kept in a restricted zone II in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Meat products, including casings, that have undergone the relevant risk-mitigating treatment, obtained from porcine animals kept in restricted zones I, II or III in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Fresh meat and meat products, including casings, obtained from porcine animals kept in areas outside restricted zones I, II and III and slaughtered in restricted zones I, II or III in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Fresh meat and meat products, including casings, obtained from porcine animals kept and slaughtered in areas outside restricted zones I, II and III in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Fresh meat and meat products, including casings, obtained from porcine animals kept and slaughtered in areas outside restricted zones I, II and III and produced or processed in restricted zones I, II or III in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Fresh meat and meat products, and any other products of animal origin, from restricted zone I obtained from wild porcine animals in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> <p>or ◦ [Meat products, which have undergone the relevant risk-mitigating treatment, from restricted zones I, II and III obtained from wild porcine animals in compliance with the special disease control measures relating to African swine fever laid down in Commission Implementing Regulation (EU) 2023/594.]</p> | | | | | | | |
| <p>Part I:</p> <p>Box use the appropriate CN codes: 02.03; 02.06; 02.09; 02.10; 05.04; 15.01; 16.01; 16.02; 16.03; 19.02.</p> <p>reference</p> <p>I.19:</p> | | | | | | | | |
| <p>Certifying Officer/Official veterinarian</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Name (in capital letters)</td> <td style="width: 50%;">Authority name</td> </tr> <tr> <td>Date of signature</td> <td>Signature</td> </tr> <tr> <td>Stamp</td> <td></td> </tr> </table> | | | Name (in capital letters) | Authority name | Date of signature | Signature | Stamp | |
| Name (in capital letters) | Authority name | | | | | | | |
| Date of signature | Signature | | | | | | | |
| Stamp | | | | | | | | |
| | | | | | | | | |