|  |  |  |  |
| --- | --- | --- | --- |
| **Part I: Description of consignment presented** | I.2. CHED Reference | I.3. Local reference | I.1. Consignor/ExporterName AddressCountry ISO Code |
| I.4. Control Authority |
| I.5. Control Authority Code |
| I.6. Consignee/Importer |  |  | I.7. Place of Destination |
| Name |  |  | Name |
| Address |  |  | Address |
| Country |  | ISO Code | Activity ID |
|  |  |  | Country ISO Code |
| I.8. Operator responsible for the consignment | I.9. Accompanying documents |
| Name | Type |
| Address | Number |
| Country |  | ISO Code | 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 **Frozen** ☐ |  | **Chilled** ☐ **Ambient** ☐ |  |
| I.17. Container No / Seal No |
| I.18. Certified as or for **Feedstuff** ☐ **Other** ☐ |  | **Trade sample** ☐ **Further process** ☐ **Human Technical Use** ☐**Consumption** ☐ | **P**☐**harmaceutical Use** |
| I.19. Conformity of the goods |  | Conforming ☐ Non-conforming ☐ |  |
| I.20. For transhipment |  | ☐ |  |
| 3rd country |  | ISO Code |  |
| BCP |  | TRACES unit No. |  |
| I.23. For internal market |  | ☐ |  |
| I.23. For private import |  | ☐ |  |
| I.25. For re-entry |  | ☐ |  |
| I.24. For non conforming goods |  | ☐* Registered No.
* Registered No.
* Registered No.
* Name
 |  |
| Customs warehouse |
| Free zone |
| Ship supplier |
| Ship |
|  |  | Port |  |
| I.27. Means of transport after BCP/storage | I.28. TransporterName AddressCountry ISO Code |
| Mode | International transport document | Identification |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| I.29. Date of departure |

|  |  |
| --- | --- |
| **Part I: Description of consignment presented** | I.31. Description of consignment |
| Commodity | Species | Product type | Batch number | Quantity | Package count | Net weight | Establishment of Origin | Final consumer |
|  |
|  |
| I.32. Total number of packages | I.33. Quantity | I.34. Total Net Weight | I.34. Total Gross Weight |
| I.35 DeclarationI, 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.Date of signature Name of Signatory Signature |

|  |  |  |  |
| --- | --- | --- | --- |
| **Part II: Decision on consignment** | II.3. Documentary CheckEU Standard Satisfactory ☐ Not satisfactory ☐ | II.4. Identity CheckSatisfactory ☐Seal check ☐ | Yes ☐ No ☐Not satisfactory ☐Full check ☐ |
| II.5. Physical Check Yes ☐ No ☐Satisfactory ☐ Not satisfactory ☐ | II.6 Laboratory Tests Yes ☐ No ☐Test Random ☐ Suspicion ☐Results Pending ☐ Satisfactory ☐ Not satisfactory ☐ |
| II.9 Acceptable for transhipment ☐3rd country ISO CodeBCP TRACES unit No. |    |
| II.11 Acceptable for transit ☐3rd country ISO CodeExit BCP TRACES unit No. |   |
| II.13 Acceptable for monitoring ☐1. Entry monitoring
2. Re-entry monitoring
 | ☐☐ |
| II.14 Acceptable for non-conforming goods ☐1. Customs warehouse
2. Free zone or Free warehouse
3. Ship
 | ☐☐☐ |
| II.16 NOT ACCEPTABLE ☐1. Destruction ☐
2. Special treatment ☐
3. Re-dispatch ☐
4. Use for other purposes ☐

Date/time  |
|  |
| II.17 Reason for Refusal1. Documentary: Missing certificate
2. Documentary: Absence of original certificate
3. Documentary: Wrong certificate model
4. Documentary: Invalid dates
5. Documentary: Missing signature/stamp
6. Documentary: Invalid authority
7. Documentary: Missing laboratory report
8. Origin: Non approved country
9. Origin: Non approved region
10. Origin: Non approved establishment
11. Physical: Prohibited species
12. Physical: Hygiene failure
13. Physical: Absence of import permit for invasive alien species (IAS)
14. Physical: Cold chain breakdown
15. Physical: Temperature failure
16. Physical: Sensory check failure
17. Physical: Presence of parasites
18. Identity: Label missing
19. Identity: Label/Document mismatch
20. Identity: Incomplete label
21. Identity: Means of transport mismatch
22. Identity: Official seal number mismatch
23. Identity: Species mismatch
24. Laboratory: Chemical contamination
25. Laboratory: Microbiological contamination
26. Laboratory: Veterinary drug
27. Laboratory: Irradiation
28. Laboratory: Non-compliant additives
29. Laboratory: Genetically modified organisms (GMO)
30. Other: Others
 | ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ |
| II.18 Details of controlled destinationName AddressCountry ISO Code |

|  |  |  |  |
| --- | --- | --- | --- |
| **Part II: Decision on consignment** | II.20 Identification of BCPBCPUnit number | Stamp | II.21 Certifying officer |
| I, the undersigned official veterinarian, certify that the checks on the consignmenthave been carried out in accordance with the Union requirements and where applicable in accordance with the nationalrequirements of the member states of destination. |
| Full name Signature |
| Date of signature |
|  |
|  |