Model Health Certificate for imports of live bivalve molluscs intended for human consumption

| _ | Norway (EN) | | Veter | nary certificate to EU | | | | | |
|---|--|--------------------------|-------|---|----------|-------------|--|--|--|
| | I.1. Consignor | | | I.2. Certificate reference number | | I.2.a. | | | |
| | Name | | | I.3. Central Competent Authority | | | | | |
| | Address | | | I.4. Local Competent Authority | | | | | |
| | Postal code | | | | | | | | |
| | Tel No. | | | | | | | | |
| ment | I.5. Consignee | | | I.6. | | | | | |
| nsign | Name | | | | | | | | |
| Part I: Details of dispatched consignment | Address | | | | | | | | |
| | Postal code | | | | | | | | |
| tails o | Tel No. | | | | | | | | |
| De | I.7. Country of origin ISO co | de I.8. Region of origin | Code | I.9. Country of destination | ISO code | I.10. | | | |
| t I: | | | | | | | | | |
| Pai | | | | | | | | | |
| | | | | | | | | | |
| | I.11. Place of origin | | | I.12. | | | | | |
| | Name | Approval number | | | | | | | |
| | Address | | | | | | | | |
| | | | | | | | | | |
| | 1.13. Place of loading | | | 1.14. Date of departure | | | | | |
| | I.15. Means of transport | | | I.16. Entry BIP in EU | | | | | |
| | Airplane Ship | Railway wagon | | | | | | | |
| | Road vehicle Other | | | I.17. | | | | | |
| | Identification | | | | | | | | |
| | Documentary references: | | | | | | | | |
| | I.18. Description of commodity | | | I.19. Commodity code (HS code) 03 07 | | | | | |
| | | | | I.20. Quantity | | | | | |
| | I.21. | | | I.22. Number of packages | | of packages | | | |
| | I.23. Identification of container/S | eal number | | I.24. Type of packaging | | | | | |
| | I.25. Commodities certified for | | | | | | | | |
| | Human consumption | | | | | | | | |
| | 1.26. | | I.27. | For import or admission into EU | | | | | |
| | I.28. Identification of the commodities | | | | | | | | |
| | Approval number of establishments Species Nature of commodity Manufacturing plant Number of packages Net | | | | | | | | |
| (Scientific name) | | | | | | | | | |
| | | | | | | | | | |
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| Live bivalve mollusc |
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| | Norway | Live biv | valve molluscs | | | | |
|--|--|------------------------------------|----------------|--|--|--|--|
| | II. Health Attestation | II.a. Certificate reference number | II.b. | | | | |
| | II.1. Public health attestation | | | | | | |
| Part II: Certification | I, the undersigned, declare that I am aware of the relevant provisions of Regulations (EC) No 178/2002, (EC) No 852/2004, (EC) No 853/2004 and No 854/2004 and certify that the live bivalve molluscs described above were produced in accordance with those requirements, in particular that the | | | | | | |
| | (1) [are dispatched as unprocessed or processed products]],] | | | | | | |
| Notes Part I: — Box reference I.11: Place of origin: name and address of the dispatch establishment. — Box reference I.11: Place of origin: name and address of the dispatch establishment. — Box reference I.11: Registration number: (nalway wagons or container/sal number: only where applicable. — Box reference I.23: Identification of container/sal number: only where applicable. — Part II: — Part II: — Part II: — Part II: (1) Delete as appropriate (2) Source may be a country, zone, or an individual farm. (3) This requirement applies to exports to all Member States. However, it is only relevant if the consignment comprises species susceptible to bonamiosis (Bonamia exitiosa and Mikrocytos roughley): matricilosis (Matrelita sydney): mikrocytosis (Mikrocytos mackini): perkinsosis (Perkinsus marinus and P. olseni/atlanticus): haplosporidiosis (Haplosporidium nelsoni and H. costale) and Withering syndrome (Candidatus Xenohaliotis californiensis), whereby one or the two statements must be retained. (4) Known susceptible species Disease (Infection with) Susceptible host species Boanamia exitiosa Tiostrea chilensis and Ostrea angasi Boanamia exitiosa Matrelita sydneyi Saccostrea (commercialis) glomerata Matrelita refringens Ostrea edulis Crassostrea virginica and C. gigas Perkinsus obseni | | | | | | | |
| Off | icial inspector | | | | | | |
| Nar | ne (in capitals) Qual | lification and title | | | | | |
| Dat | - | ature | | | | | |
| Star | mp | | - | | | | |
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