# BIRDS

# HEALTH (or ZOOSANITARY or VETERINARY) CERTIFICATE

Name and address of the government authority of the exporting country: Ministry of Health, Radetzkystraße 2, 1030 Wien

Number of the issue:

### I: Identification of the Animal(s)

Species/Breed	Number	Sex	Age	Distinctive Marks

# II: Origin of the Animal(s)

Name and address of consignor:

Name

Address

# III : Destination of the Animal(s)

Name and address of consignee:

Name

Address

Name of vessel or flight number:

Place of boarding or loading:

Date of boarding or loading:

### IV: Sanitary Information

1.	The	bird(s)	show(s)	no	clinical	signs	of	West	Nile	fever,	highly	pathogenic	avian
inf	luenz	za or lov	v pathog	enic	avian i	nfluen	za	at the	time	of ship	ment.		

2.	Meeting	one	of the	following	conditions:
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□ For bird(s) that has/have been raised since hatching, those that have been kept for the past 21 days or since hatching in a storage facility (limited to those with preventive measures against the invasion of mosquitoes) in regions that the Minister of Health, Labour and Welfare of Japan has designated as regions where highly pathogenic avian influenza or low pathogenic avian influenza has not been confirmed. (1)

OR

□ Except for bird(s) that has/have been raised since hatching, those that have been kept for the past 21 days or since hatching in a quarantine facility (limited to those with preventive measures against the invasion of mosquitoes) in regions that the Minister of Health Labour and Welfare of Japan has designated as regions where highly pathogenic avian influenza or low pathogenic avian influenza has not been confirmed.(2)

Check the appropriate box

I, the undersigned, certify that the animal described above meets the requirements.

(Signature of Official Veterinarian)

Date issued:

(Name and title of Official Veterinarian)

Ministry of AUSTRIA,

(Country name)

Official stamp