

MINISTRY OF AGRICULTURE AND RURAL DEVELOPMENT
 VETERINARY SERVICES & ANIMAL HEALTH

Veterinary Certificate to accompany Research Rodents (SPF mouse, rat, guinea pigs, hamsters, transgenic mouse) from Israel to Japan

Exporting country: **Israel**

Competent authority: **Veterinary Services and Animal Health,
 Ministry of Agriculture and Rural Development**

Number of the issue:

I. Identification of Animal(s)

Species / Breed	Number	Sex	Age	Distinctive Marks

II. Origin of Animal(s)

Name and address of consignor:

Name:

Address:

Establishment that animal(s) was/were born and kept:

Name:

Address:

Establishment number (if any):

III. Destination of 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 animals have been stored since birth in a place that is in a storage establishment meeting all of the following, that has been isolated from other areas, and in which there have been no other animals than such rodents.
 - (1) Feeding control (hereafter including the management of records of the animals and their breeding, shipment and death) and sanitary control are carried out under the supervision of a committee consisting of members concerned including veterinarians in the establishment.
 - (2) Appropriate measures are taken to ensure that the intrusion of animals from outside is prevented.
 - (3) When introduced into the establishment, the animals are confirmed not to be contaminated with pathogens of infectious diseases in order to prevent the intrusion of pathogens of infectious diseases that may infect humans through animals.
 - (4) Examinations are conducted periodically on the animals stored in the establishment to confirm that they are not contaminated with pathogens of infectious diseases.
 - (5) Information concerning the feeding and sanitary controls of the animals is recorded in documents and such documents are retained.
2. Since births, the animals have not been used in any study with pathogens of infectious disease or have not come in contact with any animal used in such a study.

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

Date issued:.....

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Name of approved establishment veterinarian

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Signature

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Name and title of official veterinarian

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Signature

Official Stamp