



Australian Government

# Government Certificate of Health to Accompany Animals or Animal Reproductive Material

Export Control Act

|                            |
|----------------------------|
| Certificate N <sup>o</sup> |
|                            |

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|   |   |  |
|---|---|--|
| Name and Address of Exporter<br><br>AUSTRALIA | Name and Address of Importer<br><br>JAPAN |  |
|   | Import Permit N <sup>o</sup>              |  |

| Description of Animals |                |   |   |
|------------------------|----------------|---|---|
| Number                 | Kind (Species) | Class (Companion, competition, breeder etc) | Identification (microchip, eartags etc) |
|                        | MAMMALS        | ZOOLOGICAL                                  |   |
|                        |                |   |   |
|                        |                |   |   |
|                        |                |   |   |
|                        |                |   |   |

| Description of Animal Reproductive Material |  |                          |  |
|---|--|--------------------------|--|
| Number                                      | Kind (Species and type; eg bovine semen) | Condition (Fresh/Frozen) | Identification (straw numbers, packing list) |
|   |  |                          |  |
|   |  |                          |  |
|   |  |                          |  |
|   |  |                          |  |
|   |  |                          |  |

|  |                         |                |
|--|-------------------------|----------------|
| The goods have complied with the requirements set out in the following page/s. |                         | Official Stamp |
| Name of Authorised Officer   | Identity N <sup>o</sup> |                |
| Signature of Authorised Officer  | Date of Issue           |                |



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## HEALTH CERTIFICATE FOR THE EXPORT OF AUSTRALIAN MAMMALS (except Rodents and Lagomorpha) TO JAPAN

### ORIGIN OF ANIMAL(S)

Name and address of consignor:

Name: .....

Address: .....

### 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 of loading: .....

### SANITARY INFORMATION

1. The animal(s) showed no clinical signs of rabies at the time of shipment.
2. The animal(s): has/have been kept in a zoological institution for at least six (6) months, or since birth or capture, in Australia.
3. Australia is free from rabies (a region that the Minister of Health, Labour and Welfare of Japan has designated as one where rabies has not been reported).

I, Dr ....., a duly authorised government veterinary officer, hereby certify that the animal(s) described above meets the requirements.

(Signature of Government Veterinarian)

.....

(Name, title and position of Government Veterinarian)

.....

.....

(Address) (NOTE: Address will vary depending on the regional office issuing the certification)

Australian Government Department of Agriculture, Water and the Environment

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CANBERRA ACT 2600

AUSTRALIA