

Part I : Details of dispatched consignment	1. Consignor / Exporter		2. CVED reference number		Local reference number:		
	<input type="checkbox"/> Name Address Country		Border Inspection Post				
			Unit number				
	3. Consignee		4. Person responsible for the consignment				
	Name Address Country		Name Address				
			5. Country of origin		+ ISO code	6. Region of origin	Code
	7. Importer		8. Place of destination				
	Name Address Country		Name Approval number Address Postal code / Region Country				
	9. Arrival at BIP (estimated date and time)		10. Veterinary documents				
	Date Time		Number(s) Date of issue Accompanying document(s) Number(s)				
11. Means of transport							
Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Railway wagon <input type="checkbox"/> Road vehicle <input type="checkbox"/> Other <input type="checkbox"/> Identification::: Documentary references:							
16. Animals certified as:							
Breeding/production <input type="checkbox"/> Fattening <input type="checkbox"/> Slaughter <input type="checkbox"/> Approved bodies <input type="checkbox"/> Pets <input type="checkbox"/> Other <input type="checkbox"/> Quarantine <input type="checkbox"/> Registered equidae <input type="checkbox"/> Relaying <input type="checkbox"/> Circus/exhibition <input type="checkbox"/> production							
17. Seal number and container numbers							
18. For transhipment to			19. For transit to 3rd Country				
BIP BIP unit n° 3rd country 3rd Country ISO code			3rd country + ISO code Exit BIP BIP unit n°				
20. For import or admission			21. Transiting Member states				
Definitive import <input type="checkbox"/> Horses Re-entry <input type="checkbox"/> Temporary admission horses <input type="checkbox"/> Exit date Exit point			Member State Member State Member State				
			+ ISO code + ISO code + ISO code				
22. Means of transport after border inspection post			23. Transporter				
Railway wagon <input type="checkbox"/> Registered No. Aeroplane <input type="checkbox"/> Flight No. Ship <input type="checkbox"/> Name Road vehicle <input type="checkbox"/> Plate No. Other <input type="checkbox"/>			Name Address Postal code / Region Country Approval number				
			24. Route plan				
			Yes <input type="checkbox"/> No <input type="checkbox"/>				
12. Animal species, Breed							
Species Number of animals Number of packages							
14. Total Number of Animals			15. Total Number of Packages				
I, the undersigned person responsible for the load detailed above, certify that to the best of my knowledge and belief the statements made in Part 1 of this document are true and complete and I agree to comply with the legal requirements of Directive 91/496/EEC, including payment for veterinary checks, as well as for redispaching consignments, for quarantine or isolation of animals, or costs of euthanasia and disposal if necessary.			Place and date of declaration Name of signatory Signature				

Part II: decision on consignment	Previous CVED: No <input type="checkbox"/> Yes <input type="checkbox"/>		27. CVED Reference Number		Local reference number	
	<input type="checkbox"/> Reference Number:					
	26. Documentary Check		28. Identity Check			
	<input type="checkbox"/>		Derogation <input type="checkbox"/>			
	EU Standard Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>		Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>			
	Additional guarantees Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>					
	National requirements Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>					
	29. Physical Check:		30. Laboratory Tests			
	Derogation <input type="checkbox"/> Total animal checked		No <input type="checkbox"/> Yes <input type="checkbox"/>			
	Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>		Tested for:			
31. Welfare check		32. Impact of the transport on animals				
Derogation <input type="checkbox"/>		Random <input type="checkbox"/> Suspicion <input type="checkbox"/>				
upon arrival Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>		Results: Pending <input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>				
33. ACCEPTABLE for Transhipment		34. ACCEPTABLE for Transit Procedure				
<input type="checkbox"/>		<input type="checkbox"/>				
BIP BIP unit n°		To 3rd Country + ISO code				
3rd country 3rd Country ISO code		Exit BIP BIP unit n°				
35. ACCEPTABLE for definitive import		36. ACCEPTABLE for temporary admission				
<input type="checkbox"/>		<input type="checkbox"/>				
For controlled destination		37. Reason for Refusal				
Slaughter <input type="checkbox"/>		1. Absence/Invalid certificate <input type="checkbox"/>				
Approved bodies <input type="checkbox"/>		2. Mis-match with documents <input type="checkbox"/>				
Quarantine <input type="checkbox"/>		3. Non approved country <input type="checkbox"/>				
38. NOT ACCEPTABLE		4. Non approved region <input type="checkbox"/>				
<input type="checkbox"/>		5. Prohibited species <input type="checkbox"/>				
1. Re-dispatching <input type="checkbox"/>		6. Absence of additional guarantees <input type="checkbox"/>				
2. Slaughter <input type="checkbox"/>		7. Safeguard clause <input type="checkbox"/>				
3. Euthanasia <input type="checkbox"/>		8. Diseased or suspect animals <input type="checkbox"/>				
39. Details of Controlled Destinations (35,36,38)		9. Non satisfactory tests <input type="checkbox"/>				
Approval no (where relevant):		10. Unfit to travel <input type="checkbox"/>				
Address:		11. Absence of national requirements <input type="checkbox"/>				
Postal code / Region		12. Infringement of international transportation regulation <input type="checkbox"/>				
40. Consignment resealed		42. Official Veterinarian				
New seal no:		I the undersigned official veterinarian for the BIP, certify that the veterinary checks on the consignment have been carried out in accordance with EU requirements and if needed in accordance with the national requirements of the member states of destination.				
41. Full identification of border inspection post and official stamp.		Name (in Capital):				
BIP Stamp		Date: Signature:				
BIP unit n°		Subsequent CVED				
43. Customs Document Reference:.		Number(s):				
44. Details on re-dispatching		45. Follow up				
Means of transport n°		Exit BIP <input type="checkbox"/> Final destination BIP <input type="checkbox"/> Local Veterinary Unit <input type="checkbox"/>				
Railway wagon <input type="checkbox"/> Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Road vehicle <input type="checkbox"/>		Arrival of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/> Correspondence of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/>				
Country of re-dispatching + ISO code						
Date:						
46. Official veterinarian						
Name (in Capital):		Unit number				
Address:		Signature:				
Date: Stamp						

Part III: Control	44. Details on re-dispatching	
	Means of transport n°	
	Railway wagon <input type="checkbox"/> Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Road vehicle <input type="checkbox"/>	
Country of re-dispatching + ISO code		
Date:		
45. Follow up		
Exit BIP <input type="checkbox"/> Final destination BIP <input type="checkbox"/> Local Veterinary Unit <input type="checkbox"/>		
Arrival of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/> Correspondence of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/>		
46. Official veterinarian		
Name (in Capital):		
Address:		
Date: Stamp		
Unit number		
Signature:		

PLANNING

1.1. ORGANISER name and address (a) (b)		1.2. Name of the person in charge of the journey			
		1.3. Telephone / Fax			
2. TOTAL EXPECTED DURATION (hours / days)					
3.1. Place and country of DEPARTURE			4.1. Place and country of DESTINATION		
3.2. Date	3.3. Time	4.2. Date	4.3. Time		
5.1. Species	5.2. Number of animals	5.3. Veterinary certificate(s) number(s)			
5.4. Estimated total weight of the consignment (in kg)			5.5. Total space foreseen for the consignment (in m ²)		
6. LIST OF FORESEEN RESTING, TRANSFER OR EXIT POINTS					
6.1. Name of the places where animals are to be rested, or transferred (including exit points)	6.2. Arrival		6.3. Length (in hours)	6.4. Transporter name and authorisation N° (if different from the organiser)	6.5 identification
	Date	Time			
7. I, the organiser, hereby declare that I am responsible for the organisation of the above-mentioned journey and I have made suitable arrangements to safeguard the welfare of the animals throughout the journey in accordance with the provisions of Council Regulation 1/2005					
8. Signature of the organiser					

(a) Organiser: see definition laid down in Article 2(q) of Council Regulation 1/2005
(b) If the organiser is a transporter the authorisation number shall be specified