

<b>Part I: Description of consignment</b>	I.1. Consignor Name Address Country		ISO Code	I.2. IMSOC reference	I.2.a. Local reference I.3. Central Competent Authority I.4. Local Competent Authority	
	I.5. Consignee Name Address Country		ISO Code	I.6. Operator conducting assembly operations independently of an establishment Name Address Approval Number Country		
	I.7. Country of origin		ISO Code	I.9. Country of destination		
	I.8. Region of origin		Code	I.10. Region of destination		
	I.11. Place of dispatch Name Address Approval Number Country		ISO Code	I.12. Place of destination Name Address Approval Number Country		
	I.13. Place of loading Name Address Approval Number Country		ISO Code	I.14. Date and time of departure		
	I.15. Means of Transport		I.16. Transporter		I.17. Accompanying documents	
	Mode	International transport document	Identification		Name Address Approval Number Country	ISO Code
					[en] accompanying document number	Date of issue
					Country	Place of issue
I.18. Transport conditions Ambient <input type="checkbox"/> Frozen <input type="checkbox"/> Chilled <input type="checkbox"/>						
I.19. Container No / Seal No						
I.20. Certified as Breeding <input type="checkbox"/> Relaying <input type="checkbox"/> Ornamental aquaculture establishment <input type="checkbox"/> Other <input type="checkbox"/> Quarantine establishment <input type="checkbox"/> Live aquatic animals for human consumption <input type="checkbox"/>						
I.21. For transit through a third country <input type="checkbox"/> Third country Exit point Entry point						
I.22. For transit through Member State(s) <input type="checkbox"/> Member State		ISO Code	I.23. For export <input type="checkbox"/> Third country Exit point		ISO Code BCP code	
I.24. Estimated journey time		I.25. Journey Log				
I.26. Total number of packages		I.27. Total quantity				
I.28. Total net weight		I.28. Total gross weight				
I.30. Description of consignment						
Commodity	Species	Quantity	Package count	Net weight		

<b>Part II: Certification</b>	II. Health information																																		
	<p>I, the undersigned hereby notify the movement of aquatic animals described in Part I in accordance with Article 220(2) of Regulation (EU) 2016/429 of the European Parliament and of the Council and with Article 17, Article 18(c) and Article 19(2) of Commission Delegated Regulation (EU) 2020/990 and confirm that the aquaculture establishment from which this consignment originates participates in a surveillance programme for a specified category C disease in accordance with Article 3(2)(b)(iv) of Commission Delegated Regulation (EU) 2020/689 and has been most recently tested in accordance with the relevant chapter of Part III of Annex VI to the same Regulation, on the date set out below with negative results:</p> <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 30%; text-align: center;">Disease</th> <th style="width: 30%; text-align: center;">Test</th> <th style="width: 40%; text-align: center;">Date (dd mm yyyy)</th> </tr> </thead> <tbody> <tr><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td></tr> <tr><td style="text-align: center;">—</td><td style="text-align: center;">—</td><td style="text-align: center;">—</td></tr> <tr><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td></tr> <tr><td style="text-align: center;">—</td><td style="text-align: center;">—</td><td style="text-align: center;">—</td></tr> <tr><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td></tr> <tr><td style="text-align: center;">—</td><td style="text-align: center;">—</td><td style="text-align: center;">—</td></tr> <tr><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td></tr> <tr><td style="text-align: center;">—</td><td style="text-align: center;">—</td><td style="text-align: center;">—</td></tr> <tr><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td><td style="text-align: center;">_____</td></tr> <tr><td style="text-align: center;">—</td><td style="text-align: center;">—</td><td style="text-align: center;">—</td></tr> </tbody> </table>			Disease	Test	Date (dd mm yyyy)	_____	_____	_____	—	—	—	_____	_____	_____	—	—	—	_____	_____	_____	—	—	—	_____	_____	_____	—	—	—	_____	_____	_____	—	—
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<p>Certifying Officer/Official veterinarian</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">Name (in capital letters)</td> <td style="width: 50%; padding: 5px;">Qualification and title</td> </tr> <tr> <td style="padding: 5px;">Date of signature</td> <td style="padding: 5px;">Signature</td> </tr> <tr> <td style="padding: 5px;">Stamp</td> <td></td> </tr> </table>				Name (in capital letters)	Qualification and title	Date of signature	Signature	Stamp																											
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