The horse was shinned from

REFERENCE NUMBER:

VETERINARY HEALTH CERTIFICATE RE-ENTRY OF HORSES TO THE UNITED ARAB EMIRATES

Country of Dispatch: CANADA

Competent Authority: CANADIAN FOOD INSPECTION AGENCY

GOVERNMENT OF CANADA

SECTION I - ORIGIN AND DESTINATION OF ANIMALS

	directly to		
place of shipment	Member State and		
	by train/truck/plane/boat		
place of destination			
Indicate the mode of transport and n	ame or flight number, whichever is the case.		
Name of Exporter			
Address			
Name of Consignee			
Hame of Consigned			

SECTION II

I, the undersigned, certify that the animal described above meets the following conditions:

- a) It originates from a country where the following diseases are reportable: African horse sickness, dourine, glanders, equine encephalomyelitis (all forms including VEE), infectious anemia, vesicular stomatitis, rabies and anthrax.
- b) The animal was examined on this day and did not show any clinical signs of disease.
- c) The animal is not to be destroyed under a national eradication program for an infectious or contagious disease.
- The animal has not been outside Canada since it's arrival on ______ from either a member state of the European Community or a country appearing in the same group as listed in Annex II of Commission Decision 93/195/EEC and since then has never been in a country other than one in the same group; it has been resident on holdings under veterinary supervision, accommodated in separated stables without coming into contact with equidae of lower health status except during racing, competition or cultural events;
- e) The animal comes from Canada where:
 - i) Venezuelan equine encephalomyelitis has not occurred during the last two (2) years;
 - ii) dourine has not occurred during the last six (6) months;
 - iii) glanders has not occurred during the last six (6) months;
 - iv) vesicular stomatitis has not occurred during the last six (6) months;
 - v) equine viral arteritis has not been reported during the last six (6) months;
- f) The animal does not originate from any part of Canada considered infected with African horse sickness (Canada is free) and has not been vaccinated.
- g) The animal does not originate from a farm nor has it had contact with any horses which are the object of an investigation for health reasons such as:
 - i) in the case of equine encephalomyelitis during the six (6) months from the time the infected animals were removed;
 - ii) in the case of infectious anemia during the time necessary to remove the infected animals and the period required to conduct two (2) negative Coggins tests with an interval of three (3) months between tests;
 - iii) in the case of vesicular stomatitis during the six (6) months.
 - iv) in the case of rabies during one (1) month from the last case.
 - v) in the case of anthrax during the fifteen (15) days from the last case.



REFERENCE	NUMBER:	

- N.B. In the case where all of the animals susceptible have been removed and the place has been disinfected, the time period required before export can take place is thirty (30) days from the date of removal and completion of disinfection except in the case of anthrax where the period is fifteen (15) days.
- h) To the best of my knowledge, the animal has not had contact with horses suffering from an infectious or contagious disease during the fifteen (15) days preceding the signing of this document.

SECTION III

The animal will be shipped in a vehicle which as been cleaned and disinfected with a disinfectant recognized in Canada and is designed in a way that droppings, litter or fodder cannot escape during transportation.

SECTION IV - IDENTIFICATION OF THE ANIMAL:

	NAME	BREED	AGE	SEX	COAT COLOUR	I.E.F. PASSPORT			
	ertificate is valid for ten (1			•					
Date	Official Export Stamp			Official Veterinarian Canadian Food Inspection Agency Government of Canada					
OWNER'S DECLARATION									
I, the u	ndersigned,	(capital let	ters)			declare that:			
1)	The animal will be shipped from the point of shipping to the point of destination without coming into contact with horses not of equal health status and be done in a manner which maintains the health and well being of the animals.								
2)	The conditions of II d) are	fulfilled.							



Owner's Signature

Place and Date