

EU Health Certificate Worksheet

Applicant (Company Name)				Mail Certificate to				
Applicant Number				Contact				
Customer Ref				Company				
Contact				Street				
E-Mail Address				City				
Telephone				State				
Fax				Zip				
<input type="checkbox"/> Faxed Certificate*				Additional Certified Copies*				
<small>*additional charges apply</small>								
I.1 Consignor Name Address Tel.N°				I.2 Certificate reference number		I.2.a		
				I.3 Central Competent Authority AMS				
				I.4 Local competent Authority				
I.5 Consignee Name Address Postal code Tel.N°				I.6				
I.7 Country of origin	ISO code	I.8 Region of origin	Code	I.9 Country of destination	ISO code	I.10		
I.11 Place of origin Name Address Approval number				I.12				
I.13 Place of loading				I.14 Date of departure				
I.15 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: Documentation reference:				I.16 Entry BIP in EU				
I.18 Description of commodity				I.17				
				I.19 Commodity code (HS code)				
				I.20 Quantity (Net/Gross Weight)				
I.21 Temperature of product Ambient <input type="checkbox"/> Chilled <input type="checkbox"/> Frozen <input type="checkbox"/>				I.22 Number of packages				
I.23 Identification of container/Seal number				I.24 Type of packaging				
I.25 Commodities certified for: Human consumption <input type="checkbox"/>								
I.26 For transit through EU to 3 rd country 3 rd country <input type="checkbox"/> ISO code				I.27 For import or admission into EU <input type="checkbox"/>				
I.28 Identification of the commodities Species (Scientific name) Approval number of establishment manufacturing plant Number of packages Net weight Batch number								

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