

PART I

**Model animal health certificate for non-commercial movements of pet dogs, pet cats or pet ferrets into a Member State from a third country or territory, referred to in Article 18(1) of Delegated Regulation (EU) 2026/131**

COUNTRY:		Animal health certificate to the EU			
<b>Part I : Details of dispatched consignment</b>	I.1. Consignor Name Address  Tel.		I.2. Certificate reference No		I.2.a.
			I.3. Central competent authority		
			I.4. Local competent authority		
	I.5. Consignee Name Address  Postal code Tel.		I.6. Person responsible for the consignment in the EU		
	I.7. Country of origin	ISO code	I.8. Region of origin	Code	I.9. Country destination
					of ISO code
					I.10. Region of destination
					Code
	I.11. Place of origin		I.12. Place of destination		
	I.13. Place of loading		I.14. Date of departure		
I.15. Means of transport		I.16. Entry BCP in EU			
		I.17. No.(s) of CITES			
I.18. Description of commodity				I.19. Commodity code (HS code) <b>010619</b>	
				I.20. Quantity	
I.21. Temperature of products				I.22. Total number of packages	
I.23. Seal/Container No				I.24. Type of packaging	
I.25. Commodities certified for: Pets <input type="checkbox"/>					
I.26. For transit to 3 <sup>rd</sup> Country			I.27. For import or admission into EU		
I.28. Identification of the commodities					
Species (Scientific name)	Sex	Colour	Breed	Identification number	Identification system and location
					Date of birth [dd/mm/yyyy]

COUNTRY:	Animal health certificate to the EU						
II. Health information	II.a. Certificate reference No	II.b. <span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>					
I, the undersigned official veterinarian <sup>(1)</sup> /veterinarian authorised by the competent authority <sup>(1)</sup> of _____ <i>(insert name of territory or third country)</i> certify that:							
<p><sup>(1)</sup> either [II.1. the animals described in Box I.28 are moved in a number of five or less;]</p> <p><sup>(1)</sup> or [II.1. the animals described in Box I.28 are moved in a number of more than five, are more than six months old and are going to participate in competitions, exhibitions or sporting events or in training for those events, and the owner or the natural person has provided evidence <sup>(2)</sup> that the animals are registered</p> <p style="padding-left: 20px;"><sup>(1)</sup> either [to attend such event;]</p> <p style="padding-left: 20px;"><sup>(1)</sup> or [with an association organising such events;]</p> <p>[II.2. the animals described in Box I.28 show no disease symptoms and are fit for the non-commercial movement on _____ <i>(insert date dd/mm/yyyy)</i>:]</p> <p>[II.3. the animals described in Box I.28 were at least 12 weeks old at the time of vaccination against rabies and at least 21 days have elapsed since the completion of the primary anti-rabies vaccination <sup>(3)</sup> carried out in accordance with the validity requirements set out in Part I of Annex VII to Commission Delegated Regulation (EU) 2020/688 and any subsequent revaccination was carried out within the period of validity of the preceding vaccination <sup>(4)</sup>; and:</p> <p style="padding-left: 20px;"><sup>(1)</sup> either [II.3.1. the animals described in Box I.28 come from a third country or a territory listed in Annex II to Commission Implementing Regulation (EU) 2026/636, either 1) directly, or 2) through a third country or territory listed in that Annex or 3) through a third country or territory other than those listed in that Annex in accordance with Article 17(2) of Commission Delegated Regulation (EU) 2026/131<sup>(5)</sup>, and the details of the relevant anti-rabies vaccination(s) are provided in the table below;]</p> <p style="padding-left: 20px;"><sup>(1)</sup> or [II.3.1. the animals described in Box I.28 come from, or are scheduled to transit through, a third country or territory other than those listed in Annex I or Annex II to Implementing Regulation (EU) 2026/636 and a rabies antibody titration test <sup>(6)</sup>, carried out on a blood sample taken by the veterinarian authorised by the competent authority, on the date indicated in the table below at least 30 days after the date of the primary vaccination, or within a current valid vaccination series, and not less than 90 days prior to the date of issue of this animal health certificate, proved an antibody titre equal to or greater than 0,5 IU/ml <sup>(7)</sup> and any subsequent revaccination was carried out within the period of validity of the preceding vaccination <sup>(4)</sup>, and the details of the relevant anti-rabies vaccination(s) and the date of sampling for testing the immune response are provided in the table below:</p>							
Transponder or tattoo		Date of vaccination [dd/mm/yyyy]	Name and manufacturer of vaccine	Batch number	Validity of vaccination		Date of the blood sampling [dd/mm/yyyy]
Alphanumeric code of the animal	Date of implantation and/or reading <sup>(8)</sup> [dd/mm/yyyy]				From [dd/mm/yyyy]	to [dd/mm/yyyy]	

**Part II: Certification**

<p>(<sup>1</sup>) either [II.4. the dogs described in Box I.28 are destined for a Member State or zone thereof with disease free status from <i>Echinococcus multilocularis</i> (<sup>8</sup>) and have been treated against <i>Echinococcus multilocularis</i>, and the details of the treatment carried out by the administering veterinarian in accordance with Annex XXI to Commission Delegated Regulation (EU) 2020/692 are provided in the table below (<sup>10</sup>)(<sup>11</sup>).]</p> <p>(<sup>1</sup>) or [II.4. the dogs described in Box I.28 have not been treated against <i>Echinococcus multilocularis</i> (<sup>12</sup>).]</p>			
Transponder or tattoo number of the dog	Anti-echinococcus treatment		Administering veterinarian
	Name and manufacturer of the product	Date [dd/mm/yyyy] and time of treatment [00:00]	Name in capitals, stamp and signature
<p>(<sup>1</sup>) either [II.5. the owner has declared (<sup>13</sup>) that the movement of the pet animals is a non-commercial movement.]</p> <p>(<sup>1</sup>) or [II.5. the owner has authorised the non-commercial movement of the pet animal in a signed declaration (<sup>14</sup>) and provided evidence (<sup>2</sup>) of his/her/their movement and the owner/authorised person has declared (<sup>13</sup>) that the movement of the pet animal is a non-commercial movement.]]</p> <p><i>Notes</i></p> <p>(a) This animal health certificate is meant for pet dogs (<i>Canis lupus familiaris</i>), pet cats (<i>Felis silvestris catus</i>) and pet ferrets (<i>Mustela putorius furo</i>).</p> <p>(b) This animal health certificate is valid for 10 days from the date of issue by the official veterinarian or in the case of the authorised veterinarian, the date of endorsement by the competent authority until the date of the documentary and identity checks at the designated travellers' point of entry into the Union. In the case of transport by sea, that period of 10 days is extended by an additional period corresponding to the duration of the journey by sea. For the purpose of further movement into other Member States, this animal health certificate is valid for a total period of six months from the date of the documentary and identity checks carried out at the travellers' point of entry into the Union or until the date of expiry of the validity of the anti-rabies vaccination, whichever date is earlier.</p> <p><i>Part I:</i></p> <p>Box I.5: Consignee: Indicate Member State of first destination. Box I.28: Identification system: Select one of the following: transponder or tattoo. Identification number: Indicate the transponder or tattoo alphanumeric code. Date of birth: As stated by the owner.</p> <p><i>Part II:</i></p> <p>(<sup>1</sup>) Keep as appropriate. (<sup>2</sup>) The evidence referred to in point II.1 (e.g. receipt of entry to the event, proof of membership) and II.5 (e.g. boarding pass, flight ticket) shall be surrendered on request by the competent authorities responsible for the checks referred to in point (b) of the Notes.</p>			

<p>(<sup>1</sup>) <i>either</i> [II.4. the dogs described in Box I.28 are destined for a Member State or zone thereof with disease free status from <i>Echinococcus multilocularis</i> (<sup>6</sup>) and have been treated against <i>Echinococcus multilocularis</i>, and the details of the treatment carried out by the administering veterinarian in accordance with Annex XXI to Commission Delegated Regulation (EU) 2020/692 are provided in the table below (<sup>10</sup>)(<sup>11</sup>).]</p> <p>(<sup>1</sup>) <i>or</i> [II.4. the dogs described in Box I.28 have not been treated against <i>Echinococcus multilocularis</i> (<sup>12</sup>).]</p>			
Transponder or tattoo number of the dog	Anti-echinococcus treatment		Administering veterinarian
	Name and manufacturer of the product	Date [dd/mm/yyyy] and time of treatment [00:00]	Name in capitals, stamp and signature
<p>(<sup>1</sup>) <i>either</i> [II.5. the owner has declared (<sup>13</sup>) that the movement of the pet animals is a non-commercial movement.]</p> <p>(<sup>1</sup>) <i>or</i> [II.5. the owner has authorised the non-commercial movement of the pet animal in a signed declaration (<sup>14</sup>) and provided evidence (<sup>2</sup>) of his/her/their movement and the owner/authorised person has declared (<sup>13</sup>) that the movement of the pet animal is a non-commercial movement.]]</p> <p><i>Notes</i></p> <p>(a) This animal health certificate is meant for pet dogs (<i>Canis lupus familiaris</i>), pet cats (<i>Felis silvestris catus</i>) and pet ferrets (<i>Mustela putorius furo</i>).</p> <p>(b) This animal health certificate is valid for 10 days from the date of issue by the official veterinarian or in the case of the authorised veterinarian, the date of endorsement by the competent authority until the date of the documentary and identity checks at the designated travellers' point of entry into the Union.</p> <p>In the case of transport by sea, that period of 10 days is extended by an additional period corresponding to the duration of the journey by sea.</p> <p>For the purpose of further movement into other Member States, this animal health certificate is valid for a total period of six months from the date of the documentary and identity checks carried out at the travellers' point of entry into the Union or until the date of expiry of the validity of the anti-rabies vaccination, whichever date is earlier.</p> <p><i>Part I:</i></p> <p>Box I.5: Consignee: Indicate Member State of first destination.</p> <p>Box I.28: Identification system: Select one of the following: transponder or tattoo.  Identification number: Indicate the transponder or tattoo alphanumeric code.  Date of birth: As stated by the owner.</p> <p><i>Part II:</i></p> <p>(<sup>1</sup>) Keep as appropriate.</p> <p>(<sup>2</sup>) The evidence referred to in point II.1 (e.g. receipt of entry to the event, proof of membership) and II.5 (e.g. boarding pass, flight ticket) shall be surrendered on request by the competent authorities responsible for the checks referred to in point (b) of the Notes.</p>			

	<p>(<sup>13</sup>) The declaration referred to in point II.5 shall be attached to this animal health certificate and comply with the model and additional requirements set out in Parts 2 and 6 of Annex V to Implementing Regulation (EU) 2026/705.</p> <p>(<sup>14</sup>) The declaration referred to in point II.5 shall be attached to this animal health certificate and comply with the model and additional requirements set out in Parts 1 and 6 of Annex V to Implementing Regulation (EU) 2026/705.</p>
<p>Official veterinarian/Authorised veterinarian</p> <p>Name (in capital letters): <span style="float: right;">Qualification and title:</span></p> <p>Address:</p> <p>Telephone:</p> <p>Date:</p> <p>Signature: <span style="float: right;">Stamp:</span></p>	
<p>Endorsement by the competent authority (not necessary when the animal health certificate is signed by an official veterinarian)</p> <p>Name (in capital letters): <span style="float: right;">Qualification and title:</span></p> <p>Address:</p> <p>Telephone:</p> <p>Date:</p> <p>Signature: <span style="float: right;">Stamp:</span></p>	
<p>Official at the travellers' point of entry</p> <p>Name of the official or of the relevant public authority (in capital letters):</p> <p>Address:</p> <p>Telephone:</p> <p>E-mail address:</p> <p>Date of completion of the documentary and identity checks:</p> <p>Signature: <span style="float: right;">Stamp:</span></p>	