

**VETERINARY CERTIFICATE FOR  
BLOOD PRODUCT TO BE EXPORTED TO  
NEW ZEALAND FROM SWEDEN**

<b>Part I : Details of dispatched consignment</b>	I.1. Consignor		I.2. Certificate reference number		
	Name:				
	Address:		Veterinary Authority		
			Swedish Board of Agriculture		
	I.4. Consignee				
	Name:				
	Address:				
	I.5. Country of origin		ISO code *	I.6. Zone or compartment of origin **	
	Sweden		SE		
	I.7. Country of destination		ISO code *	I.8. Zone or compartment of destination **	
	New Zealand		NZ		
	I.9. Place of origin				
	Name:				
	Address:				
I.10. Place of shipment		I.11. Date of Departure			
I.12. Means of transport		I.13. Entry Point			
Aeroplane <input type="checkbox"/>		Ship <input type="checkbox"/>	Railway wagon <input type="checkbox"/>		
Road vehicle <input type="checkbox"/>		Other <input type="checkbox"/>			
Identification:		I.14. CITES permit No(s)**			
I.15. Description of commodity		I.16. Commodity code (CN code)			
Animal repellent containing		2301			
heat treated blood product of porcine origin		I.17. Total quantity			
I.18. Temperature of products		I.19. Total number of packages			
Ambient <input type="checkbox"/>		Chilled <input type="checkbox"/>	Frozen <input type="checkbox"/>		
I.20. Identification of container/seal number		I.21. Type of packaging			
I.22. Commodities intended for use as					
Technical use <input type="checkbox"/>					
Other <input type="checkbox"/>					
I.23. For					
Definitive export					
I.24. Identification of the commodities					

SJV ES.169 2012-04

\*Optional and \*\*If referenced in part II

Official veterinarian

Stamp

Signature

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COUNTRY: SWEDEN

II. Health information

II.a. Certificate reference number

Part II: Certification

The undersigned Official Veterinarian certifies that the animal products described above satisfies the following requirements

- African swine fever, classical swine fever, foot and mouth disease and swine vesicular disease have not occurred in Sweden during the previous 12 months.
- No case of anthrax has been recorded in Sweden since 2011.

Official veterinarian

Name and address (in capital letters):

Official position:

Date:

Stamp:

Signature: