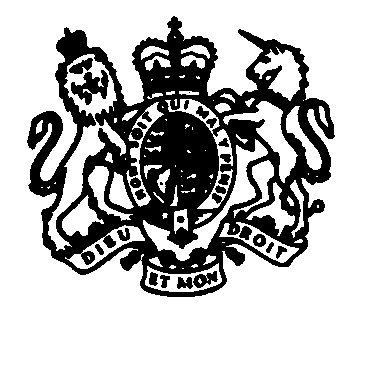
**Department of Agriculture Environment and Rural Affairs (DAERA)**

**OWNER'S/EXPORTER'S/MANAGER’S DECLARATION - HATCHERY**

**EXPORT OF DAY-OLD CHICKS TO EU MEMBER STATES**

REFERENCE: CERTIFICATE NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name)

Of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Address)

As owner\*/exporter\*/manager\* of hatchery below for export of day-old chicks on the certificate above from flocks on the attached schedule of species \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Address | Hatchery  Approval number | NIPHAS  Approval number |
|  |  |  |  |

To be certified for export on the above certificate

To\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_ declare that:

(Country) (Date) (Time)

(At \* delete if not applicable)

1. The day-old chicks are intended for \*Breeding or \*Production.

1. The hatchery complies with the requirements for NIPHAS and can provide test results to the certifying officer.

1. The hatchery is not subject to movement restrictions and is not in a restricted zone as a result of an occurrence of avian disease listed for the species.

Listed diseases in Article 5 & Annex II in

<https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32016R0429>

1. The day-old chicks for export on the above certificate come from a hatchery where there were no abnormal mortalities with an undetermined cause.

**nOTE: Salmonella arizonae and Mycoplasma meleagridis testing is required for turkeys only.**

**IF THE DECLARATION IS FOR ANY OTHER SPECIES IGNORE REFERENCE TO THESE.**

**DETAILS IN NIPHAS HANDBOOK**

1. The day-old chicks have hatched from eggs coming from **flocks** that have been continuously resident in one or more NIPHAS approved establishments since hatching or for at least the 42 days before collection of the hatching eggs from which the day-old chicks have hatched. Owner`s Declarations are available.
2. The establishments of origin of the hatching eggs \*(a) have not reported or had infection confirmed with Salmonella Pullorum, Salmonella Gallinarum and Salmonella arizonae within the 12 months before the hatching eggs, from which the day-old chicks have hatched, were collected. Delete if not applicable.

OR \*(b) Salmonella Pullorum, Salmonella Gallinarum or Salmonella arizonae infection was confirmed during the last 12 months before the hatching eggs, from which the day-old chicks have hatched, were collected, the infected flock was destroyed, the establishment cleaned and disinfected and the entire flock had 2 tests at least 21 day apart for Salmonella Pullorum, Salmonella Gallinarum and Salmonella arizonae with negative results in accordance with NIPHAS programme. Test results are available.

Delete if not applicable.

List flocks that comply with (a) or (b):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname | Flock Number | NIPHAS Number | Comply with (a) above  Y/N | Comply with (b) above  Y/N |
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1. The flocks of origin \*(a) has not reported or had infection confirmed with Mycoplasma gallisepticum and Mycoplasma meleagridis in the 12 months before the hatching eggs were collected. Delete if not applicable.

OR \*(b) Infection with Mycoplasma gallisepticum or Mycoplasma meleagridis was confirmed during the last 12 months before collection of the hatching eggs and either

1. \*The infected flock had 2 tests at least 60 day apart for Mycoplasma gallisepticum and Mycoplasma meleagridis with negative results. Test results are available. Delete if not applicable.

OR

1. \*The infected flock was destroyed, the establishment cleaned and disinfected and the entire flock had 2 tests at least 21 day apart for Mycoplasma gallisepticum and Mycoplasma meleagridis with negative results. Test results are available. Delete if not applicable.

List flocks that comply with (a) or (b) (i) or (b) (ii):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Surname | Flock Number | NIPHAS Number | Comply with (a) above – Y/N | Comply with (b)(i) above – Y/N | Comply with (b)(ii) above – Y/N |
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1. The hatching eggs
   1. **\***Have not been vaccinated against Newcastle Disease or
   2. **\***Have been vaccinated against Newcastle Disease (applicable only to chickens (*Gallus gallus)* and turkeys) using

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_ (date)

**(Name and type (live or inactivated) of Newcastle disease virus strain used in vaccine(s))**

At the age of \_\_\_\_\_\_\_\_\_\_\_\_weeks

\*Live attenuated vaccines comply with the criteria of Annex VI to Delegated Regulation (EU) 2020/688, that is, they were authorized in GB, NI or EU.

If other, describe here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If inactivated vaccine was used, delete.

1. The day-old chicks
   1. **\***Have not been vaccinated against Newcastle Disease or
   2. **\***Have been vaccinated against Newcastle Disease (applicable only to chickens (*Gallus gallus)* and turkeys) using

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date)

\_\_\_\_\_\_\_\_\_(at the age of (days))

**(Name and type (live or inactivated) of Newcastle disease virus strain used in vaccine(s))**

\*Live attenuated vaccines comply with the criteria of Annex VI to Delegated Regulation (EU) 2020/688, that is, they were authorized in GB, NI or EU.

If other, describe here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If inactivated vaccine was used, delete.

1. \*Delete if the hatching eggs were not imported from a Third Country or its territory or zone.

If imported please indicate / delete as applicable.

(a) The day-old chicks described in Part I have hatched from eggs which have entered NI from a third country or its territory or zone (including GB) and \*were /\*were not placed in separate incubators, including separate hatchers, from other hatching eggs.

(b) \*Other hatching eggs were already present and the hatchery ensured that breeding poultry and productive poultry which have been hatched from such hatching eggs (imported and those mixed with imported eggs) are treated as the same status and have not mixed with other poultry and are being moved to an establishment in \*NI/\*EU Member State.

(c) Copies of incoming documents including the veterinary certificate for import of hatching eggs from a Third Country and from the Point of Entry /Border Control Post are available for inspection by the certifying veterinarian.

1. \* Delete if not exporting to a listed country

For listed countries, see ANNEX XIN Implementing Reg. (EU) 2021/620: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32021R0620&from=EN>

Working practices ensured that the hatching eggs were incubated at completely separate times and locations from hatching eggs not fulfilling the requirements below for movement to a listed country:

1. The day-old chicks have not been vaccinated against infection with Newcastle Disease virus
2. The day-old chicks come fromhatching eggs which have not been vaccinated against infection with Newcastle Disease virus
3. The day-old chicks come from hatching eggs which come fromflocks that

\* **Either** have not been vaccinated against infection with Newcastle Disease virus

\* **Or** have been vaccinated against infection with Newcastle disease virus with \*inactivated vaccines or

\*live attenuated vaccines that comply with the criteria of Annex VI to Delegated Regulation (EU) 2020/688, that is, that were authorized in GB, NI or EU.

AND

Flock vaccination took place at least 30 days before the collection of the hatching eggs

For listed countries, see ANNEX XIN Implementing Reg. (EU) 2021/620: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32021R0620&from=EN>

1. Applicable to exports of day-old chicks of *Gallus gallus* (chickens)and turkeys only, otherwise delete.

Owner`s Declarations for the parent flocks of origin, listed in Annex below, show that they comply with the requirements of the National Control Programme for Salmonella with results below (or on attached Owner`s Declarations for Flocks of Origin).

If any of the results were positive for the serotypes below during the life of the flock indicate as positive:

\* Breeding flock: Salmonella Hadar, Salmonella Virchow and Salmonella Infantis

\* Production flock: Salmonella Enteritidis and Salmonella Typhimurium.

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| --- | --- | --- | --- | --- |
| Identification of the flock | Age of the birds | Date of last sampling of the flock from which the testing result is known  (DD/MM/YYYY) | Result of all testing in the flock (add lines as necessary) | |
| Positive | Negative |
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1. Vaccines to control Salmonella were administered to the **flocks of origin** as follows:

List below if appropriate **or** attach Owner`s Declaration/s. Extend table if required.

Insert N/A if not administered.

|  |  |  |
| --- | --- | --- |
| Flock Number | Name of Vaccine | Date administered |
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1. Vaccines to control Salmonella were administered to the **day-old chicks** as follows:

List below if appropriate **or** attach Owner`s Declaration/s. Extend table if required.

Insert N/A if not administered.

|  |  |  |
| --- | --- | --- |
| Flock Number | Name of Vaccine | Date administered |
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1. For reasons **other than the Salmonella control programme**, antimicrobials and vaccines \*were/\*were not administered to the day-old-chicks (including in-ovo injection).

Provide details; extend table as appropriate:

|  |  |
| --- | --- |
| Name of  Antimicrobial or Vaccine | Date administered |
|  |  |
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1. \*Applicable to exports of day-old chicks of *Gallus gallus* (chickens)and turkeys intended for breeding, otherwise delete.

Owner`s Declarations for the flocks of origin of the day-old chicks for export state that neither Salmonella Enteritidis nor Salmonella Typhimurium were detected within the Salmonella National Control Programme in those flocks.

1. Applicable to exports of day-old chicks for breeding or flocks of productive poultry to Finland or Sweden – Owners Declarations for flocks of origin declare that they tested negative for Salmonella in compliance with Reg (EC) 2003/644
2. The boxes/containers used for transporting the day-old chicks
   1. Contain only day-old chicks of the same species, category and type and are of the same health status;
   2. Are labelled with:
3. the name of the Member State of origin
4. the approval or registration number of the establishment of origin
5. the species of poultry
6. the number of chicks in each box;
   1. Are either unused and purpose-designed disposable containers that will be destroyed after first use OR

Are cleaned and disinfected after use and dried or allowed to dry before next use.

1. The means of transport (road/rail vehicle, vessels/aircraft) and the containers/boxes in which day-old chicks are transported are :
2. Constructed so that chicks cannot escape or fall out
3. Visual inspection of the space where chicks are kept is possible;
4. The escape of animal excrements, litter or feed is prevented or minimised;
5. The escape of feathers is prevented or minimised.
6. The means of transport are cleaned and disinfected as soon as possible after every transport of poultry and if necessary, cleaned and disinfected again and in any case dried or allowed to dry before any new loading of poultry.
7. Medicines and monitoring records and Owner`s Declarations for flocks of origin, listed in Schedule below, are available as required for the certifying veterinarian.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SCHEDULE - HATCHERY**

FOR FLOCKS OF ORIGIN OF DAY-OLD CHICKS FOR EXPORT ON

INTRA.XI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| Name | Address | Flock  Approval number | NIPHAS  Approval number |
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