NAME AND ADDRESS OF CONSIGNOR		VETERINARY IMPORT PERM	IIT NUMBER	CERTIFICATE NUMBER
		VETERINARY HEALTH AND MEAT INSPECTION CERTIFICATE FOR HORSEMEAT		
NAME AND ADDRESS OF CONSIGNEE		ESTABLISHMENT NUMBER, NAME AND ADDRESS OF SLAUGHTERHOUSE		
		DATE OF SLAUGHTER		
EXPORTING COUNTRY		ESTABLISHMENT NUMBER, NAME AND ADDRESS OF CUTTING/PACKING ESTABLISHMENT		
UNITED STATES OF AMERICA				
COUNTRY OF DESTINATION				
REPUBLIC OF SOUTH AFRICA				
PLACE OF LOADING	MEANS OF TRANSPORT (Name of Ship/Flight Number)		PORT OF EN	ITRY
NATURE OF CUTS	NUMBER OF CUTS OR PACKAGES		NET WEIGH	Т
T .1 1 1 00 1 1				

I, the undersigned official veterinarian, certify:

- 1. That the meat/offal products were derived from animals which:
- a. were born and raised in the U.S. or Canada and slaughtered in the U.S.;
- b. were not slaughtered in any disease eradication campaign;
- c. were not exposed to any infection during transport or slaughter;
- d. were subjected to both ante- and postmortem veterinary inspection, found to be free from signs of disease, and the meat is sound and wholesome and unconditionally passed as fit for human consumption;
- e. were slaughtered and the meat handled/cut/processed and packed, at the establishment indicated above, which is approved by the Director: Veterinary Public Health of South Africa;
- f. the carcasses from which the meat is derived has been subject to an examination for trichinosis as described in Chapter 3.5.3 of the Manual of Standards for Diagnostic Tests and Vaccines of the O.I.E. or the meat has been subjected to one of the treatments to destroy trichinae described in 9 CFR 318.10 of the U.S. regulations.
- 2. That directly following postmortem inspection the meat was chilled to deep temperature not exceeding plus 7°C.
- 3. That the meat was hygienically handled and transported at all times.
- 4. That all carcasses/parts/packaging/wrapping bear the official inspection legends of the slaughter/cutting/packing plant(s) at which the animals were slaughtered and the meat/offal handled, all of which are approved as stated above.
- 5. That the meat/offal was not subjected to ionizing irradiation.

SO DEPARTMENT ON	TYPED NAME AND TITLE OF OFFICIAL VETERINARIAN	PLACE
ascurvi	SIGNATURE OF OFFICIAL VETERINARIAN	DATE SIGNED