



SUPPLEMENTARY DOCUMENT

I, the undersigned official veterinarian, certify that:

1. The horses identified in Health Certificate- / Passport- or Chip no:

Were held in isolation at _____ from _____ (time and date)

To the best of my knowledge, and based on the written declaration of the designated veterinarian of the premises, there has been no evidence of infectious or contagious diseases of equines during the 15 days immediately prior to the entry of the export horses identified above.

Place _____ Date ____/____/____

Signature

Name and qualifications (in Block capitals)

Stamp (when available)
