

Časť I: Detaily o predloženej zásielke	I.2. Odkaz		I.3. Miestna referencia	I.1. Odosielateľ/vývozca		
			I.4. Control Authority	Meno/názov		
			I.5. Control Authority Code	Adresa		
				Krajina		
				Kód ISO		
	I.6. Prijemca/dovozca			I.7. Miesto určenia		
	Meno/názov			Meno/názov		
	Adresa			Adresa		
	Krajina			Activity ID		
	Kód ISO			Krajina		
			Kód ISO			
I.8. Prevádzkovateľ zodpovedný za zásielku			I.9. Sprievodné doklady			
Meno/názov			Druh			
Adresa			Číslo			
Krajina			Dátum vydania			
Kód ISO			Krajina a miesto vydania			
			Odkazy na obchodné doklady			
I.10. Prior notification						
Dátum			Čas			
I.13. Dopravný prostriedok			I.11. Krajina pôvodu			
			Kód ISO			
Druh	Dokument	Identifikácia	I.12. Región pôvodu			
I.15. Zariadenie pôvodu						
Meno/názov						
Adresa						
Číslo schválenia						
Krajina						
Kód ISO						
I.16. Prepravné podmienky						
Teplota okolia <input type="checkbox"/>			Chladené <input type="checkbox"/>			
I.17. Číslo kontajnera/číslo pečate						
I.18. Tovar certifikát ako						
Iné <input type="checkbox"/>		Local use <input type="checkbox"/>		Ľudská spotreba <input type="checkbox"/>		
Feedstuff <input type="checkbox"/>						
I.19. Súlad tovaru s požiadavkami						
Vyhovuje <input type="checkbox"/>			Nevyhovuje <input type="checkbox"/>			
I.20. Na prekládku						
Tretia krajina			Kód ISO			
Hraničná kontrolná stanica			Č. jednotky TRACES			
I.23. Pre vnútorný trh <input type="checkbox"/>						
I.23. For private import <input type="checkbox"/>						
I.25. Na opätovný vstup <input type="checkbox"/>						
I.24. Pre nevyhovujúci tovar						
Colný sklad	<input type="checkbox"/>	Registračné č.	<input type="checkbox"/>			
Slobodné pásmo	<input type="checkbox"/>	Registračné č.				
Dodávateľ zásobujúci lode	<input type="checkbox"/>	Registračné č.				
Loď	<input type="checkbox"/>	Meno/názov				
		Prístav				
I.27. Dopravný prostriedok po hraničnej kontrolnej stanici/uskladnení			I.28. Dopravca			
Druh	Dokument	Identifikácia	Meno/názov			
			Adresa			
			Krajina			
			Kód ISO			
I.29. Dátum odchodu						

**Jednotný vstupný zdravotný
doklad pre živočíšne produkty**

Časť II: Rozhodnutie o zásielke

II.18 Details of controlled destination	
Meno/názov	
Adresa	
Krajina	Kód ISO
II.20 Identifikácia hraničnej kontrolnej stanice	II.21 Certifying officer
Hraničná kontrolná stanica	Pečiatka
Číslo jednotky	Ja, podpísaný úradný veterinárny lekár, potvrdzujem, že kontroly zásielky boli vykonané v súlade s požiadavkami Únie a prípadne v súlade s vnútroštátnymi požiadavkami cieľových členských štátov.
	Celé meno
	Podpis
	Dátum podpisu

Part I: Description of consignment presented

I.2. CHED Reference	I.3. Local reference	I.1. Consignor/Exporter Name Address Country ISO Code	
	I.4. Control Authority		
	I.5. Control Authority Code		
I.6. Consignee/Importer Name Address Country ISO Code		I.7. Place of Destination Name Address Activity ID Country ISO Code	
I.8. Operator responsible for the consignment Name Address Country ISO Code		I.9. Accompanying documents Type Number Date of Issue Country and place of issue Commercial documentary references	
I.10. Prior notification Date Time			
I.13. Means of transport		I.11. Country of Origin ISO Code	
Mode	International transport document	Identification	I.12. Region of Origin
I.15. Establishment of origin Name Address Approval Number Country ISO Code			
I.16. Transport conditions Ambient <input type="checkbox"/> Chilled <input type="checkbox"/>			
I.17. Container No / Seal No			
I.18. Certified as or for Other <input type="checkbox"/> Local use <input type="checkbox"/> Human Consumption <input type="checkbox"/> Feedstuff <input type="checkbox"/>			
I.19. Conformity of the goods Conforming <input type="checkbox"/> Non-conforming <input type="checkbox"/>			
I.20. For transhipment 3rd country ISO Code BCP TRACES unit No.			
I.23. For internal market <input type="checkbox"/>			
I.23. For private import <input type="checkbox"/>			
I.25. For re-entry <input type="checkbox"/>			
I.24. For non conforming goods <input type="checkbox"/>			
Customs warehouse	<input type="checkbox"/>	Registered No.	
Free zone	<input type="checkbox"/>	Registered No.	
Ship supplier	<input type="checkbox"/>	Registered No.	
Ship	<input type="checkbox"/>	Name Port	
I.27. Means of transport after BCP/storage		I.28. Transporter	
Mode	International transport document	Identification	Name Address Country ISO Code
I.29. Date of departure			

Part I: Description of consignment presented

I.31. Description of consignment
1.02 MEAT AND EDIBLE MEAT OFFAL
0201 Meat of bovine animals, fresh or chilled
020110 Carcasses and half-carcasses

Commodity	Species	Batch number	Quantity	Package count	Net weight	Establishment of Origin	Product type	Final consumer

I.32. Total number of packages	I.33. Quantity	I.34. Total Net Weight	I.34. Total Gross Weight
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I.35 Declaration
 I, the undersigned operator responsible for the consignment detailed above, certify that to the best of my knowledge and belief the statements made in Part I of this document are true and complete, and I agree to comply with the requirements of Regulation (EU) 2017/625 on official controls, including payment for official controls, as well as for re-dispatching consignments, quarantine or isolation of animals, or costs of euthanasia and disposal where necessary.

Date of signature _____ Name of Signatory _____ Signature _____

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Part II: Decision on consignment

II.3. Documentary Check EU Standard Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	II.4. Identity Check Satisfactory <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not satisfactory <input type="checkbox"/> Seal check <input type="checkbox"/> Full check <input type="checkbox"/>
II.5. Physical Check Satisfactory <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	II.6 Laboratory Tests Yes <input type="checkbox"/> No <input type="checkbox"/> Test Random <input type="checkbox"/> Suspicion <input type="checkbox"/> Results Pending <input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>
II.7. Welfare Check Satisfactory <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	
II.9 Acceptable for transhipment <input type="checkbox"/> 3rd country _____ ISO Code _____ BCP _____ TRACES unit No. _____	
II.11 Acceptable for transit <input type="checkbox"/> 3rd country _____ ISO Code _____ Exit BCP _____ TRACES unit No. _____	
II.13 Acceptable for monitoring <input type="checkbox"/> 1. Entry monitoring <input type="checkbox"/> 2. Re-entry monitoring <input type="checkbox"/>	
II.14 Acceptable for non-conforming goods <input type="checkbox"/> 1. Customs warehouse <input type="checkbox"/> 2. Free zone or Free warehouse <input type="checkbox"/> 3. Ship <input type="checkbox"/>	
II.16 NOT ACCEPTABLE <input type="checkbox"/> 1. Destruction <input type="checkbox"/> 2. Special treatment <input type="checkbox"/> 3. Re-dispatch <input type="checkbox"/> 4. Use for other purposes <input type="checkbox"/>	
Date/time _____	
II.17 Reason for Refusal 1. Documentary: Missing certificate <input type="checkbox"/> 2. Documentary: Absence of original certificate <input type="checkbox"/> 3. Documentary: Wrong certificate model <input type="checkbox"/> 4. Documentary: Invalid dates <input type="checkbox"/> 5. Documentary: Missing signature/stamp <input type="checkbox"/> 6. Documentary: Invalid authority <input type="checkbox"/> 7. Documentary: Missing laboratory report <input type="checkbox"/> 8. Origin: Non approved country <input type="checkbox"/> 9. Origin: Non approved region <input type="checkbox"/> 10. Origin: Non approved establishment <input type="checkbox"/> 11. Physical: Prohibited species <input type="checkbox"/> 12. Physical: Hygiene failure <input type="checkbox"/> 13. Physical: Invasive species <input type="checkbox"/> 14. Physical: Cold chain breakdown <input type="checkbox"/> 15. Physical: Temperature failure <input type="checkbox"/> 16. Physical: Sensory check failure <input type="checkbox"/> 17. Physical: Presence of parasites <input type="checkbox"/> 18. Identity: Label missing <input type="checkbox"/> 19. Identity: Label/Document mismatch <input type="checkbox"/> 20. Identity: Incomplete label <input type="checkbox"/> 21. Identity: Means of transport mismatch <input type="checkbox"/> 22. Identity: Official seal number mismatch <input type="checkbox"/> 23. Identity: Species mismatch <input type="checkbox"/> 24. Laboratory: Chemical contamination <input type="checkbox"/> 25. Laboratory: Microbiological contamination <input type="checkbox"/> 26. Laboratory: Veterinary drug <input type="checkbox"/> 27. Laboratory: Irradiation <input type="checkbox"/> 28. Laboratory: Non-compliant additives <input type="checkbox"/> 29. Laboratory: Genetically modified organisms (GMO) <input type="checkbox"/> 30. Other: Others <input type="checkbox"/>	
II.18 Details of controlled destination Name _____ Address _____ Country _____ ISO Code _____	

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Part II: Decision on consignment

II.20 Identification of BCP

BCP

Stamp

Unit number

II.21 Certifying officer

I, the undersigned official veterinarian, certify that the checks on the consignment have been carried out in accordance with the Union requirements and where applicable in accordance with the national requirements of the member states of destination.

Full name

Signature

Date of signature