

Attachment 1

Application form for the designated establishments of day-old poultry and fertilized eggs

Serial Number: (by BAPHIQ)

Date (dd/mm/yyyy)
Item : <input type="checkbox"/> Newly added to Table.1 qualified establishments <input type="checkbox"/> Newly added to Table.2 observed establishments <input type="checkbox"/> Recovery
Information of the government of the exporting country, the domestic associations or the importers: 1. Name of the government/associations/importers: 2. Name and Title of the Representative or Person-in-Charge: 3. Name and Title of the Contact Person: 4. Address: 5. Telephone: 6. E-mail: 7. Fax:
Source of Information: 1. Country: 2. Name and Address of the designated establishment(s)
Documents to be included: <input type="checkbox"/> The exporting country certifies that there are no cases of HPAI of the designated establishment(s) in the past 6 months. <input type="checkbox"/> There has been no HPAI outbreak for at least 28 days after the last case of culling, and the cleaning and disinfection is completed. These are confirmed by one of the following information: 1. The designated establishments are published by WAHIS. 2. The designated establishments are published by the website of the exporting country. 3. The confirmation information has been submitted by the government of the exporting country to this country. <input type="checkbox"/> Others: such as the certificate of the previous importing recorders; or _____
<input type="checkbox"/> Signature or seal of the Representative of the government of the exporting country <input type="checkbox"/> Signature or seal of the Person-in-Charge of the domestic associations or the importers and stamp with an official seal