



LEX30065

Australian Government  
Department of Agriculture,  
Water and the Environment

## Non-livestock Chargeable Hours - Record Sheet

Document 1

Page 1 of 42

Export permit number: 322-002945	Departure date: 7/12/2022
Exporter name: <b>S 47F(1)</b> C/O <b>S 47G(1)</b>	Exporter reference:
Country destination: CHINA	Total number of animals: 1
	Species: DOG

Details of time spent on consignment							
Date	Start	Finish	Time (mins)	No. of units	Fee type (See table below)	Details	Initial
1/12/2022				1	NOI - Non-Vet	NOI assessment and approval	s. 22(1)(a)(ii)
5/12/22	8:40	8:45	15	1		Docs Assessment - EPHC vet assessment	s. 22(1)(a)(ii)

Activity	Total units	ELSA code	Activity	Total units	ELSA code
Export Permit	1	SLCPNLCL2207	Inspection – Non-Vet (e.g. m/chip verification)		SLFINLNV2207
NOI Assessment – Non-Vet	1	SLFANLNV2207	Inspection – Vet		SLFINLV2207
EPHC Assessment – Vet	1	SLAEPNLV2207	Reissue (please start a new timesheet)		SLCDR2207





**Australian Government**  
**Permit to export animals**

*Export Control Act*

**Permit  
Number:**  
**322-002945**  
**Valid until:**  
**8/12/2022**

**Exporter details**

**Name** s 47F(1) C/O s 47G(1)  
**Address** s 47G(1)

**Importer details**

**Name** s 47F(1) \*PAX ON BOARD\*  
**Address** s 47F(1)  
**Country** CHINA

**Export details**

**Date of departure** 7/12/2022  
**Flight number/vessel** CZ326  
**Port of loading** SYDNEY  
**Destination country** CHINA  
**Destination port** GUANGZHOU  
**Seal number/s**

**Animal details**

Number	Kind (species)	Class
1	DOG	COMPANION

**Additional conditions**

a) It is a condition of this export permit that the animal/s to which it applies leave Australia within 72 hours after this permit is granted, unless approved otherwise.

**Authorised officer**

**Official stamp**

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s. 22(1)(a)(ii)

Name of authorised officer

Identity number

s 22(1)(a)(ii)

5/12/2022

Signature of authorised officer

Date of issue

s. 22(1)(a)(ii)



**Australian Government**  
**Government certificate of health to accompany animals**

*Export Control Act*

**Certificate  
 Number:  
 322-002945  
 Page 1 of 3**

**s. 22(1)(a)(ii)**

**Exporter details**

**Name** s 47F(1) C/O s 47G(1)  
**Address** s 47G(1)

**Importer details**

**Name** s 47F(1) \*PAX ON BOARD\*  
**Address** s 47F(1)  
**Country** CHINA

**Export details**

<b>Date of departure</b>	7/12/2022	<b>Destination country</b>	CHINA
<b>Flight number/vessel</b>	CZ326	<b>Destination port</b>	GUANGZHOU
<b>Port of loading</b>	SYDNEY	<b>Import permit/s</b>	

**Animal details**

**Seal number/s**

Number	Species	Breed	Sex	Age	Identification
1	DOG	GREYHOUND	M	3Y	M/CHIP:s 11C(1)(a)

**Veterinary certification**

I certify that the animal/s underwent an examination or inspection on 4/12/2022 and showed no clinical signs of infectious and contagious diseases or external parasites and was/were fit to travel.

I certify that Australia is free from rabies. There has been no occurrence of rabies in Australia in the past six months. See attached Rabies Vaccination Certificate and vaccination certificate for distemper, hepatitis and parvovirus.

**Authorised officer**

**Official stamp**

**s 22(1)(a)(ii)**

**s 22(1)(a)(ii)**

**s. 22(1)(a)(ii)**

-----  
**Name of authorised officer**

-----  
**Identity number**

-----  
 5/12/2022

-----  
**Signature of authorised officer**

-----  
**Date of issue**

**s 22(1)(a)(ii)**

s. 22(1)(a)(ii)

s. 22(1)(a)(ii)

## FORM 4

## Rabies Vaccination Certificate

### 1. Owner details


a)	Owner:	s 47F(1)
b)	Address:	s 47F(1)

### 2. Animal details

a)	Name:	BLUEY
b)	Microchip Number /Tattoo:	s 11C(1)(a)
c)	Scan/Implant date:	14/10/2022
d)	Location of microchip	Between shoulder blades
e)	Species:	K9.
f)	Sex:	<input type="checkbox"/> Female <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Entire <input type="checkbox"/> Desexed
g)	Age/Date of Birth:	28/04/2019.
h)	Breed:	Greyhound.
i)	Colour:	Blue

### 3. Vaccination details

I the undersigned veterinarian declare that I have vaccinated the animal described above as follows:

a)	Date of Vaccination:	14/10/22	Vaccine Label:
b)	Name of Vaccine:	Intervet Nobivac Rabies	 <p style="font-size: small;">Nobivac® Rabies Batch/Lot: A572A01 Exp./Valid: 12-2024</p>
c)	Batch Number:	A572A01	
d)	Expiry Date:	12/2024	
e)	Based on the manufacturer's recommendation, booster vaccination for this animal is due on:	14/10/2025.	

### 4. Registered Veterinarian

a)	Name:	s 47F(1)
b)	Veterinary Board Registration Number:	s 47F(1)
c)	Signature:	s 47F(1)
d)	Date:	14/10/2022
e)	Address:	s 47G(1)

# s 47G(1)

### 5. Endorsement by Government Veterinarian

a)	Name:	s 22(1)(a)(ii)
b)	Veterinary Board Registration Number:	s 22(1)(a)(ii)
c)	Authorised Officer Number:	s 22(1)(a)(ii)
d)	Date:	05 DEC 2022
e)	Signature:	s 22(1)(a)(ii)

Notes: Sections 1 – 4 to be completed before signing by the Registered Veterinarian

Section 5 to be completed by the Government Veterinarian issuing the official Health Certificate and Export Permit

Health Certificate No.

322-002945-23

Page 2 of 3

05 DEC 2022

s. 22(1)(a)(ii)



s 47G(1)

s 47G(1)

### Certificate of Vaccination

#### Owner Details

s 47F(1)

Phone:  
Mobile:

#### Animal Details

Name: Bluey  
Species: Canine  
Breed: Greyhound  
Colour:  
Sex: Male Desex:  
DOB: 28 Apr 2019  
Age: 3 years, 6 months and 17 day  
Microchip: s 11C(1)(a)



### Vaccinations

Bluey was given a C5 Vaccination on 14 Oct 2022 and is due to be vaccinated again on 14 Oct 2023.

Protection after vaccination may take up to two weeks, therefore isolate Bluey during this time.

Vaccines are normally harmless, however if Bluey shows signs of illness after vaccination please contact us immediately.

s 47F(1)  
s 47G(1)

S 47F(1)

Health Certificate No. 322-002945  
Page 3 of 3

s. 22(1)(a)(ii)

05 DEC 2022 05 DEC 2022

s 22(1)(a)(ii)

s. 22(1)(a)(ii)

## Section B: Registered veterinarian details

Given name (s)

s 47F(1)

Surname

s 47F(1)

Registration number

s 47F(1)

Veterinary clinic

s 47G(1)

## Section C: Consignment details

Destination country

CHINA

Scheduled date of export

07/12/2022

Exporter's name

s 47G(1)

Email address

s 47F(1)

Exporter's phone number

s. 47F(1)

Exporter's address

s 47G(1)

Suburb/Town/City

s 47G(1)

State/Territory

s 47G(1)

Postcode

s 47G(1)

Species	Breed	Sex	Age	Name and identification	Colour/markings
Example: Dog	Bull terrier	F (D)	2 yrs	"Rex", microchip number	White/black
DOG	GREYHOUND	M	3 YRS	s 11C(1)(a) BLUEY	BLUE

\*(D) indicates the animal is desexed



**Australian Government**

**Department of Agriculture,  
Water and the Environment**

**ADA095.0321**

MARCH 2021

## Declaration of pre-export veterinary health and welfare inspection for live animals (other than livestock)

### Section A: General information

<b>Purpose of this form</b>	To provide details and declaration of the health and welfare for live animals (other than livestock) prior to export.
<b>Before applying</b>	See the 'Health and welfare inspection' section of <a href="http://www.agriculture.gov.au/export/controlled-goods/live-animals/companion/vets/info-pack-vets-companion-animal-exports-countries-other-than-nz#a">www.agriculture.gov.au/export/controlled-goods/live-animals/companion/vets/info-pack-vets-companion-animal-exports-countries-other-than-nz#a</a> webpage on the department's website for more information about this process.
<b>To complete this form</b>	<p><b>Electronically</b> You will need the latest version of Adobe Acrobat Reader to save changes to your document.</p> <p><b>Manually</b> Use black or blue pen Print in BLOCK LETTERS Mark boxes with a tick or a cross.</p>
<b>Your form must</b>	Have all sections completed.
<b>Submit your application</b>	Submit your certificate through the <a href="#">Live Animal Export email address</a> of the department office in the exporting region.

## Section D: Veterinary declaration

I, **s 47F(1)** \_\_\_\_\_, being veterinarian registered in a state or territory of Australia, have

inspected the animal/s described above on 04/12/2022, (date) at **s 47G(1)** \_\_\_\_\_

**s 47G(1)** \_\_\_\_\_, (clinic name and address where inspection was conducted) and found the animal/s to be free from clinical signs of infectious and/or contagious diseases and free from infestation with external parasites.

I am satisfied that the animals are healthy and are fit to travel.

I have maintained relevant records as outlined on the department's website (Perform testing, treatments and vaccinations) and can produce these if requested.

I declare that the information I have provided is true and correct.

I understand that a person may commit an offence or be liable to a civil penalty if the person makes a false or misleading statement in an application or provides false or misleading information or documents (sections 136.1, 137.1 and 137.2 of the *Criminal Code* and sections 367, 368 and 369 of the Export Control Act).

Signature (enter signature or type your name)

Date (dd/mm/yyyy)

**s 47F(1)**

04/12/2022

Full name

Phone

**s 47F(1)**

**s 47G(1)**

Email

**s 47G(1)**

## Section E: Owner/exporter declaration

I, **s 47F(1)** C/O **s 47G(1)** \_\_\_\_\_ being the (tick applicable):

owner

exporter

of the animal/s described above and confirm that the animal/s have been in Australia (tick applicable):

since birth, or

for the whole of the previous six months, or

since importation from \_\_\_\_\_ (country), \_\_\_\_\_ months ago and are not under any quarantine restrictions.

### Considerations

- **EU & GB, Channel Islands and the Isle of Man (cats)** have not been resident on holdings where during the past 60 days cases of Hendra virus have been confirmed.
- **Korea (cats)** have originated from an establishment or farm or premise where no cases of Hendra virus or Nipah virus have occurred during the last 60 days.
- **Malaysia (dogs/cats)** have originated from an establishment or farm or premise where no cases of Hendra virus have occurred during the last 6 months.

- **New Caledonia (cats)** there has been no cases of Hendra virus during the last 60 days on the property where the cats have been held prior to export.
- **Sri Lanka (dogs/cats)** the animal was not in contact with animals showing clinical signs of any infectious or contagious disease including filariasis and leptospirosis for cats/dogs and distemper, infectious hepatitis, parvovirus and dermatomycosis for dogs for a period of three months immediately prior to export.
- **South Africa (dogs)** will be shipped in containers which conform to IATA regulations, which will be either new or suitably disinfected and fumigated before loading and are of such a nature that contact with other animals of a lesser health status, en route, is prevented. I have informed the owner/person in custody that treatment for dirofilariasis must continue for 6 months after arrival in South Africa and I confirm that this person has sufficient amounts of the drugs used in possession to carry out the required therapy.
- **South Africa (cats)** will be shipped in containers which conform to IATA regulations, which will be either new or suitably disinfected and fumigated before loading and are of such a nature that contact with other animals of a lesser health status, en route, is prevented.
- **UAE (dogs/cats)** the animal was placed in a crate that was cleaned and disinfected before use and complies with the IATA regulations.

I declare that the information I have provided is true and correct.

I understand that a person may commit an offence or be liable to a civil penalty if the person makes a false or misleading statement in an application or provides false or misleading information or documents (sections 136.1, 137.1 and 137.2 of the Criminal Code and sections 367, 368 and 369 of the Export Control Act).

Signature (enter signature or type your name)

Date (dd/mm/yyyy)

s 47F(1) C/O s 47G(1)

04/12/2022

Full name

s 47F(1)

Address

s 47G(1)

Phone

s. 47F(1)

Email

s 47F(1)

## Section F: Privacy notice

'Personal information' means any information or opinion about an identified, or reasonably identifiable, individual.

'Sensitive personal information' is a subset of personal information and means any information or opinion about an individual's racial or ethnic origin, political opinion or association, religious beliefs or affiliations, philosophical beliefs, sexual preferences or practices, trade or professional associations and memberships, union membership, criminal record, health or genetic information and biometric information or templates.

The Department of Agriculture, Water and the Environment collects your personal information (as defined in the *Privacy Act 1988*) for the purpose of assessing this declaration. If you fail to provide some or all of your personal information, we will not be able to process this form.

The department may disclose your personal information to relevant authorities provided the disclosure is consistent with the Privacy Act and other relevant laws.

See the department's [Privacy Policy](#) to learn more about accessing or correcting personal information or making a complaint. Alternatively, telephone the department on +61 2 6272 3933.



## Australian Government

Department of Agriculture,  
Water and the Environment

# Notice of Intention to Export Live Animals (other than Livestock)

Official form approved under section 65, 239 and 243 of the *Export Control Act 2020*

## Section A: General information

<b>Purpose of this form</b>	To provide a notice of intention to export live animal/s other than livestock, and to apply for an export permit and a health certificate for the export of live animal/s other than livestock.
<b>Before applying</b>	See the Companion Animals webpage on the department's website and the 'Helpful information for completing this application' located in Section L of this application.
<b>To complete this form</b>	<p><b>Electronically</b></p> <p>You will need the latest version of Adobe Acrobat Reader to save changes to your document.</p> <p><b>Manually</b></p> <p>Use black or blue pen Print in BLOCK LETTERS Mark boxes with a tick or a cross.</p>
<b>Processing fee</b>	Application fees will apply – charging guidelines are available on the department's website.
<b>Your form must include</b>	Have all sections completed.
<b>Submit your application</b>	Submit your certificate through the <a href="#">Live Animal Export email address</a> of the Department office in your region.





## Section B: Exporter's details

## 1 Applicant details

Title	Given name (s)	Family name	
<input type="text"/>	<input type="text" value="s 47F(1)"/>	<input type="text" value="s 47F(1)"/>	
Company name			
<input type="text" value="C/O s 47G(1)"/>			
Address			
<input type="text" value="s 47G(1)"/>			
Suburb/town/city		State/Territory	Postcode
<input type="text" value="s 47G(1)"/>		<input type="text" value="s 47G(1)"/>	<input type="text" value="s 47G(1)"/>
Phone number	Email		
<input type="text" value="s. 47F(1)"/>	<input type="text" value="s 47F(1)"/>		

## 2 Registered business details

Registered business details			
<input type="text" value="s 47G(1)"/>			
Australian Business Number (ABN)			
<input type="text" value="s 47G(1)"/>			
Address			
<input type="text" value="s 47G(1)"/>			
Suburb/town/city		State/Territory	Postcode
<input type="text" value="s 47G(1)"/>		<input type="text" value="s 47G(1)"/>	<input type="text" value="s 47G(1)"/>
Work phone (include area code)		Mobile	
<input type="text"/>		<input type="text" value="s. 47F(1)"/>	
Email			
<input type="text" value="s 47F(1)"/>			

## Section C: Importer details

## 3 Importer

Title	Given name (s)	Family name	
<input type="text"/>	<input type="text" value="s 47F(1)"/>	<input type="text" value="s 47F(1)"/>	
Company name			
<input type="text" value="*PAX ON BOARD*"/>			
Address 1			
<input type="text" value="s 47F(1)"/>			
Address 2			
<input type="text"/>			
Country	Discharge port		
<input type="text" value="CHINA"/>	<input type="text" value="GUANGZHOU BAIYUN INTERNATIONAL AIRPORT"/>		



**4 Name of the person receiving the consignment**

Title	Given name (s)	Family name
	s 47F(1)	s 47F(1)
Phone	Email	
s 47F(1)	s 47F(1)	

**Section D: Description of live animal/s****5 Details of material being exported**

Quantity	Species (please include breed)	Class (companion, competition, breeder)	Identification (microchip, name, colour etc.)	Sex	Age
1	DOG/GREYHOUND	COMPANION	MC: s 11C(1)(a)	M	3 YEARS
			NAME: BLUEY		
			COLOR: BLUE		

Please use the box provided below if your animal/s details cannot match the format above.

**Section E: Transport details****6 Departure details**

Departure port	Departure date	Estimated arrival date
SYDNEY INTERNATIONAL AIRPORT	07/12/2022	07/12/2022

**7 Will the animal/s be traveling by sea or air?**

Sea (go to question 8)

Air (go to question 9)

**8 Sea transport details**

Voyage number	Vessel name
Route (including transit/tranship stops)	

**9 Air transport details**

Flight number	Departure time
CZ326	10:00 AM
Route (including transit/tranship stops)	
SYDNEY-GUANGZHOU	



## Section F: Veterinarian details

### 10 Details of the veterinarian assisting with collection and export

Title	Given name (s)	Family name	
s. 47F(1)	s 47F(1)	s 47F(1)	
Practice name			
s 47G(1)			
Address			
s 47G(1)			
Suburb/town/city	State/Territory	Postcode	
s 47G(1)	s 47G(1)	s 47G(1)	
Phone number	Email		
s 47G(1)	s 47G(1)		
Registration number	Veterinarian clinic		
s 47G(1)	s 47G(1)		
Qualification			
s. 47F(1)			
Proposed appointment date with the department	Scheduled date of final health inspection		
05/12/2022	04/12/2022		

## Section G: Pre-export isolation

### 11 Will your animal/s require pre-export isolation?

- Yes (go to question 12)
- No (go to question 13)

### 12 Isolation/establishment details

Expected arrival date	Expected departure date		
Title	Given name (s)	Family name	
Establishment name			
Email	Phone		
Address			
Suburb/town/city	State/Territory	Postcode	



## Section H: Preparation for export

### 13 Where were the importing country conditions sourced from?

- MICoR
- Import permit
- Other (please specify)

If the importing country requirements have been sourced from the import permit a certified National Accreditation Authority for Translators and Interpreters (NAATI) translated copy in English must be attached with your application.

- A certified NAATI (level 2/3) translated copy of the import permit or importing country requirements is attached (if required)

### 14 As part of the preparation for export, I declare:

- Animal/s will be tested, treated, and inspected according to importing country requirements
- Testing and treatment schedule is attached (if applicable)

## Section I: Additional information

### 15 Please provide a summary of supporting documents attached and any documents still to be submitted.

## Section J: Applicant declaration

### To be completed by the individual listed in Section B.

I declare that I have authority to make this declaration for and on behalf of the applicant.

I declare that the information I have provided is true and correct.

I understand that a person may commit an offence or be liable to a civil penalty if the person makes a false or misleading statement in an application or provides false or misleading information or documents (sections 136.1, 137.1 and 137.2 of the *Criminal Code* and sections 367, 368 and 369 of the *Export Control Act*).

I understand that under section 66, section 240 and section 244 of the *Export Control Act*, I am required to, as soon as practicable, provide the department with additional or corrected information, if I become aware that information included in this application changes, is incomplete or incorrect.

Signature (enter signature or type your name)

Date (dd/mm/yyyy)

s 47F(1) C/O s 47G(1)

01/11/2022

Full name

s 47F(1)





## Section K: Privacy notice

'Personal information' means any information or opinion about an identified, or reasonably identifiable, individual.

'Sensitive personal information' is a subset of personal information and means any information or opinion about an individual's racial or ethnic origin, political opinion or association, religious beliefs or affiliations, philosophical beliefs, sexual preferences or practices, trade or professional associations and memberships, union membership, criminal record, health or genetic information and biometric information or templates.

The Department of Agriculture, Water and the Environment collects your personal information (as defined in the *Privacy Act 1988*) in relation to this form for the purposes of assessing your application. The department is authorised under the *Export Control Act 2020* to assess your application and related purposes. If you fail to provide some or all of your personal information, we will not be able to process your application.

The department may disclose your personal information to relevant authorities in an importing country and other Australian agencies where necessary for these purposes, provided the disclosure is consistent with the *Privacy Act 1988* and other relevant laws. Your personal information may also be disclosed to relevant employees within your organisation for the purpose of approving your licence and to maintain the currency of your personal information for the purpose of the licence. Your personal information will be used and stored in accordance with the Australian Privacy Principles.

By completing and submitting this form you consent to the collection, use and disclosure of all personal information, including sensitive information, in this form to the relevant authorities in the importing country.

The department has not taken steps to ensure that the relevant authorities in the importing country do not breach the Australian Privacy Principles. This means that:

- relevant authorities in the importing country may not be accountable under the Privacy Act
- you may not be able to seek redress under the Privacy Act
- you may not be able to seek redress in the overseas jurisdiction.

Relevant authorities in the importing country may not be subject to any privacy obligations or to any principles similar to the Australian Privacy Principles.

See the department's [Privacy Policy](#) to learn more about accessing or correcting personal information or making a complaint. Alternatively, telephone the department on +61 2 6272 3933.



## Section L: How to complete this form

**Exporter details** The Notice of Intention (NOI) must provide the department with details of the person exporting the animal reproductive material.  
We also ask that you provide details of the person that the department can contact regarding the export.

**Importer details** The importer details are required on the Certificate of Health which will accompany the animal reproductive material, please ensure these are correct.

### Description of live animal/s

Example of a completed table.

Quantity	Species (please include breed)	Class (companion, competition, breeder)	Identification (microchip, name, colour etc.)	Sex	Age
1	Dog/German Shepherd	Companion	MC: 900 100 200 300 Colour: Brown Name: Jack	M (D)	3 yrs
1	Quarter Horse	Competition	Branding: RL BAY Marking: White Blaze	Gelding	5 yrs
1	Cat/Ragdoll	Companion	MC 900 400 500 600 Colour: Grey/White Name: Gizmo	F (D)	12 yrs

(D) indicates that the animal is de-sexed.

**Transport details**

**Port of departure:** the airport or seaport from the animal/s departing Australia.

**Transport method:** how the animal will be leaving Australia.

**Route including transit/tranship ports:** list all the departure, transit, tranship and arrival ports.

**Description of travel arrangements:** transport container details, dimensions, construction material and arrangements for feed and water during the journey. For more information, please visit the International Air Transport Association website.

**Veterinarian details** Please provide the name and address of the veterinarian who will be preparing the animal/s for export.

**Pre-export isolation (if applicable)** If the importing country requires isolation or quarantine, please provide details of the premises where the animal/s will be held prior to export as inspection may be required.  
The NOI is the application for approval of your nominated isolation premises for the period of the preparation for your animal/s. All requirements for pre-export approval must be met in accordance with the NOI.

**Preparation for export** Please provide the relevant import permit, relevant health certificate/s and all supporting documents that meet the importing country requirements.

**Department approval** On receipt of your NOI the department will review the information and may request additional information. If satisfied with the NOI the department will provide you with an approval to prepare the animal/s for export in accordance with the information provided. The department will also confirm an appointment time.

SAVE

PRINT

CLEAR

SUBMIT





## Non-livestock Chargeable Hours - Record Sheet

Export permit number:	s 22(1)(a)(ii) 323-000279	Departure date:	s 22(1)(a)(ii) 18/01/2023
Exporter name:	s 22(1)(a)(ii) s 47G(1)	Exporter reference:	s 22(1)(a)(ii)
Country destination:	s 22(1)(a)(ii) China	Total number of animals:	s 22(1)(a)(ii) 1
		Species:	s 22(1)(a)(ii) Dog

### Details of time spent on consignment

Date	Start	Finish	Time (mins)	No. of units	Fee type (See table below)	Details	Initial
16/01/2023				1	NOI - Non-Vet	NOI assessment and approval	s. 22(1)(a)(ii)
16/01/23	11.50	11.58	8	1	EPHC -vet	Docs assessment	s. 22(1)(a)(ii)

Activity	Total units	ELSA code	Activity	Total units	ELSA code
Export Permit	1	SLCPNLCL2207	Inspection – Non-Vet (e.g. m/chip verification)		SLFINLNV2207
NOI Assessment – Non-Vet	1	SLFANLNV2207	Inspection – Vet		SLFINLV2207
EPHC Assessment – Vet	1	SLAEPNLV2207	Reissue (please start a new timesheet)		SLCDR2207



## Australian Government

### Permit to export animals

Export Control Act

<b>Permit Number:</b> <b>323-000279</b>  <b>Valid until:</b> <b>19/01/2023</b>
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#### Exporter details

**Name** s 47F(1) C/O s 47G(1)  
**Address** s 47G(1)

#### Importer details

**Name** s 47F(1) \*PAX ON BOARD\*  
**Address** s 47F(1)

**Country** CHINA

#### Export details

<b>Date of departure</b>	18/01/2023	<b>Destination country</b>	CHINA
<b>Flight number/vessel</b>	CZ326	<b>Destination port</b>	GUANGZHOU
<b>Port of loading</b>	SYDNEY	<b>Seal number/s</b>	

#### Animal details

Number	Kind (species)	Class
1	DOG	COMPANION

#### Additional conditions

a) It is a condition of this export permit that the animal/s to which it applies leave Australia within 72 hours after this permit is granted, unless approved otherwise.

Authorised officer

Official stamp

s 22(1)(a)(ii)

s. 22(1)(a)(ii)

s 22(1)(a)(ii)

Name of authorised officer

Identity number

s 22(1)(a)(ii)

16/01/2023

Signature of authorised officer

Date of issue



Certificate  
Number:  
323-000279  
Page 1 of 3

## Australian Government

### Government certificate of health to accompany animals **s. 22(1)(a)(ii)**

Export Control Act

#### Exporter details

**Name** s 47F(1) C/O s 47G(1)  
**Address** s 47G(1)

#### Importer details

**Name** s 47F(1) \*PAX ON BOARD\*  
**Address** s 47F(1)

**Country** CHINA

#### Export details

<b>Date of departure</b>	18/01/2023	<b>Destination country</b>	CHINA
<b>Flight number/vessel</b>	CZ326	<b>Destination port</b>	GUANGZHOU
<b>Port of loading</b>	SYDNEY	<b>Import permit/s</b>	

#### Animal details

#### Seal number/s

Number	Species	Breed	Sex	Age	Identification
1	DOG	GREYHOUND	M	4Y	M/CHIP:s 11C(1)(a)

#### Veterinary certification

I certify that the animal/s underwent an examination or inspection on 15/01/2023 and showed no clinical signs of infectious and contagious diseases or external parasites and was/were fit to travel.

I certify that Australia is free from rabies. There has been no occurrence of rabies in Australia in the past six months. See attached Rabies Vaccination Certificate and vaccination certificate for distemper, hepatitis and parvovirus.

Authorised officer

Official stamp

**s 22(1)(a)(ii)**

**s 22(1)(a)(ii)**

**s. 22(1)(a)(ii)**

Name of authorised officer

Identity number

**s 22(1)(a)(ii)**

16/01/2023

Signature of authorised officer

Date of issue

s 47G(1)

s 47F(1)

### Vaccination Certificate

This is to certify that, "Pp" Long,  
a Canine, Greyhound  
Gender: Male  
Age: 4 years 6 months 15 days  
Date of Birth: 01-06-2018  
Colour: Black & White

Microchip number: s 11C(1)(a) received the following vaccination(s) on 16-12-2022:

Boehringer-Ingelheim Duramune C3 (3 yr) on 16-12-2022  
Batch: 5262002  
Expiry: 26/10/23

Boehringer-Ingelheim Bronchi-Shield KC Intranasal (1yr) on 16-12-2022  
Batch: 5267013B  
Expiry: 20/01/24

The following member of staff verifies that s 47G(1) administered the above vaccination to  
s 47F(1) the named animal.

s 47F(1)

Veterinarian:

Date of Certificate: 16-12-2022

s 47G(1)



16 JAN 2023

s. 22(1)(a)(ii)

Health Certificate No. 323 - 000279

Page 2 of 3

s 22(1)(a)(ii)

s 47G(1)

s 47G(1)

s 22(1)(a)(ii)



FORM 4

## Rabies Vaccination Certificate

### 1. Owner details


a)	Owner:	s 47F(1)
b)	Address:	s 47F(1) s 47F(1)

### 2. Animal details

a)	Name:	PP
b)	Microchip Number /Tattoo:-	s 11C(1)(a)
c)	Scan/Implant date:	16/12/2022
d)	Location of microchip	BETWEEN THE SHOULDER BLADES
e)	Species:	CANINE
f)	Sex:	<input type="checkbox"/> Female <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Entire <input type="checkbox"/> Desexed
g)	Age/Date of Birth:	01/06/2018
h)	Breed:	GREYHOUND
i)	Colour:	BLACK AND WHITE

### 3. Vaccination details

I the undersigned veterinarian declare that I have vaccinated the animal described above as follows:

a)	Date of Vaccination:	16/12/2022	Vaccine Label:
b)	Name of Vaccine:	Intervet Nobivac Rabies	
c)	Batch Number:	A586B02	
d)	Expiry Date:	09/2025	
e)	Based on the manufacturer's recommendation, booster vaccination for this animal is due on:	16/12/2025	

### 4. Registered Veterinarian

a)	Name:	s 47F(1)
b)	Veterinary Board Registration Number:	s 47F(1)
c)	Signature:	s 47F(1)
d)	Date:	16/12/2022
e)	Address:	s 47G(1) s 47G(1)

### 5. Endorsement by Government Veterinarian

a)	Name:	s 22(1)(a)(ii)	St:	s. 22(1)(a)(ii)
b)	Veterinary Board Registration Number:	s 22(1)(a)(ii)		
c)	Authorised Officer Number:	s 22(1)(a)(ii)		
d)	Date:	16 JAN 2023		
e)	Signature:	s 22(1)(a)(ii) s 22(1)(a)(ii)		

Notes: Sections 1 – 4 to be completed before signing by the Registered Veterinarian administering the vaccine.

Section 5 to be completed by the Government Veterinarian issuing the official Health Certificate and Export Permit

Health Certificate No. 323 - 000279

Page 3 of 3

## Section B: Registered veterinarian details

Given name (s)

s 47F(1)

Surname

s 47F(1)

Registration number

s 47F(1)

Veterinary clinic

s 47G(1)

## Section C: Consignment details

Destination country

CHINA

Scheduled date of export

18/01/2023

Exporter's name

s 47G(1)

Email address

s 47F(1)

Exporter's phone number

s. 47F(1)

Exporter's address

s 47G(1)

Suburb/Town/City

s 47G(1)

State/Territory

s 47G(1)

Postcode

s 47G(1)

Species	Breed	Sex	Age	Name and identification	Colour/markings
Example: Dog	Bull terrier	F (D)	2 yrs	"Rex", microchip number	White/black
DOG	GREYHOUND	M	4 YRS	s 11C(1)(a) PP	BLACK & WHITE

\*(D) indicates the animal is desexed

## Section D: Veterinary declaration

I, **s 47F(1)** \_\_\_\_\_, being veterinarian registered in a state or territory of Australia, have inspected the animal/s described above on 15/01/2023, (date) at **s 47G(1)** \_\_\_\_\_

**s 47G(1)** \_\_\_\_\_, (clinic name and address where inspection was conducted) and found the animal/s to be free from clinical signs of infectious and/or contagious diseases and free from infestation with external parasites.

I am satisfied that the animals are healthy and are fit to travel.

I have maintained relevant records as outlined on the department's website (Perform testing, treatments and vaccinations) and can produce these if requested.



I declare that the information I have provided is true and correct.

I understand that a person may commit an offence or be liable to a civil penalty if the person makes a false or misleading statement in an application or provides false or misleading information or documents (sections 136.1, 137.1 and 137.2 of the *Criminal Code* and sections 367, 368 and 369 of the *Export Control Act*).

Signature (enter signature or type your name)

Date (dd/mm/yyyy)

**s 47F(1)**

15/01/2023

Full name

Phone

**s 47F(1)**

**s. 47G(1)**

Email

**s 47G(1)**

## Section E: Owner/exporter declaration

I, **s 47F(1)** C/O s 47G(1) \_\_\_\_\_ being the (tick applicable):

owner



exporter

of the animal/s described above and confirm that the animal/s have been in Australia (tick applicable):



since birth, or



for the whole of the previous six months, or



since importation from \_\_\_\_\_ (country), \_\_\_\_\_ months ago and are not under any quarantine restrictions.

### Considerations

- **EU & GB, Channel Islands and the Isle of Man (cats)** have not been resident on holdings where during the past 60 days cases of Hendra virus have been confirmed.
- **Korea (cats)** have originated from an establishment or farm or premise where no cases of Hendra virus or Nipah virus have occurred during the last 60 days.
- **Malaysia (dogs/cats)** have originated from an establishment or farm or premise where no cases of Hendra virus have occurred during the last 6 months.

Health Certificate No.

323 - 0 0 0 0 8 0

Page 3 of 3

03 JAN 2

s 22(1)(a)(ii) s. 22(1)(a)(ii)

FORM 4

## Rabies Vaccination Certificate

## 1. Owner details


a)	Owner:	s 47F(1)
b)	Address:	s 47F(1)

## 2. Animal details

a)	Name:	PP
b)	Microchip Number / <del>Tattoo</del> :	s 11C(1)(a)
c)	Scan/Implant date:	16/12/2022
d)	Location of microchip	BETWEEN THE SHOULDER BLADES
e)	Species:	CANINE
f)	Sex:	<input type="checkbox"/> Female <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Entire <input type="checkbox"/> Desexed
g)	Age/Date of Birth:	01/06/2018
h)	Breed:	GREYHOUND
i)	Colour:	BLACK AND WHITE

## 3. Vaccination details


I the undersigned veterinarian declare that I have vaccinated the animal described above as follows:

a)	Date of Vaccination:	16/12/2022	Vaccine Label:
b)	Name of Vaccine:	Intervet Nobivac Rabies	
c)	Batch Number:	A586802	
d)	Expiry Date:	09/2025	
e)	Based on the manufacturer's recommendation, booster vaccination for this animal is due on:	16/12/2025	

## 4. Registered Veterinarian

a)	Name:	s 47F(1)
b)	Veterinary Board Registration Number:	s 47F(1)
c)	Signature:	s 47F(1)
d)	Date:	16/12/2022
e)	Address:	s 47G(1)

## 5. Endorsement by Government Veterinarian

a)	Name:	s 22(1)(a)(ii)	Stamp:  s. 22(1)(a)(ii)
b)	Veterinary Board Registration Number:	s 22(1)(a)(ii)	
c)	Authorised Officer Number:	s 22(1)(a)(ii)	
d)	Date:	03 JAN 2023	
e)	Signature:	s 22(1)(a)(ii) s 22(1)(a)(ii)	

Notes: Sections 1 – 4 to be completed before signing by the Registered Veterinarian administering the vaccine.

Section 5 to be completed by the Government Veterinarian issuing the official Health Certificate and Export Permit

Health Certificate No. 323 - 0 000 80

Page 2 of 3

03 JAN 2023

s 47G(1)

s 22(1)(a)(ii) s. 22(1)(a)(ii)

s 47F(1)

### Vaccination Certificate

This is to certify that, "Pp" Long,  
a Canine, Greyhound  
Gender: Male  
Age: 4 years 6 months 15 days  
Date of Birth: 01-06-2018  
Colour: Black & White

Microchip number: s 11C(1)(a) received the following vaccination(s) on 16-12-2022:

Boehringer-Ingelheim Duramune C3 (3 yr) on 16-12-2022  
Batch: 5262002  
Expiry: 26/10/23

Boehringer-Ingelheim Bronchi-Shield KC Intranasal (1yr) on 16-12-2022  
Batch: 5267013B  
Expiry: 20/01/24

The following member of staff verifies that s 47G(1) administered the above vaccination to  
s 47F(1) the named animal.

s 47F(1)

Veterinarian:

Date of Certificate: 16-12-2022

s 47G(1)



s 47G(1)

s 47G(1)

## Section B: Exporter's details

## 1 Applicant details

Title	Given name (s)	Family name
	s 47F(1)	s 47F(1)
Company name		
C/O s 47G(1)		
Address		
s 47G(1)		
Suburb/town/city	State/Territory	Postcode
s 47G(1)	s 47G(1)	s 47G(1)
Phone number	Email	
s. 47F(1)	s 47F(1)	

## 2 Registered business details

Registered business details		
s 47G(1)		
Australian Business Number (ABN)		
s 47G(1)		
Address		
s 47G(1)		
Suburb/town/city	State/Territory	Postcode
s 47G(1)	s 47G(1)	s 47G(1)
Work phone (include area code)	Mobile	
	s. 47F(1)	
Email		
s 47F(1)		

## Section C: Importer details

## 3 Importer

Title	Given name (s)	Family name
	s 47F(1)	s 47F(1)
Company name		
*PAX ON BOARD*		
Address 1		
s 47F(1)		
Address 2		
Country	Discharge port	
CHINA	GUANGZHOU BAIYUN INTERNATIONAL AIRPORT	

**4 Name of the person receiving the consignment**

Title	Given name (s)	Family name
	s 47F(1)	s 47F(1)
Phone	Email	
s 47F(1)	s 47F(1)	

**Section D: Description of live animal/s****5 Details of material being exported**

Quantity	Species (please include breed)	Class (companion, competition, breeder)	Identification (microchip, name, colour etc.)	Sex	Age
1	DOG/GREYHOUND	COMPANION	MC:s 11C(1)(a)	M	4 YEARS
			NAME: PP		
			COLOR: BLACK AND WHITE		

Please use the box provided below if your animal/s details cannot match the format above.

**Section E: Transport details****6 Departure details**

Departure port	Departure date	Estimated arrival date
SYDNEY INTERNATIONAL AIRPORT	18/01/2023	18/01/2023

**7 Will the animal/s be traveling by sea or air?**

Sea (go to question 8)

Air (go to question 9)

**8 Sea transport details**

Voyage number	Vessel name
Route (including transit/tranship stops)	

**9 Air transport details**

Flight number	Departure time
CZ326	10:00 AM
Route (including transit/tranship stops)	
SYDNEY-GUANGZHOU	

## Section F: Veterinarian details

### 10 Details of the veterinarian assisting with collection and export

Title	Given name (s)	Family name		
s. 47F(1)	s 47F(1)	s 47F(1)		
Practice name				
s 47G(1)				
Address				
s 47G(1)				
Suburb/town/city		State/Territory	Postcode	
s 47G(1)		s 47G(1)	s 47G(1)	
Phone number	Email			
s 47G(1)	s 47G(1)			
Registration number	Veterinarian clinic			
s 47F(1)	s 47G(1)			
Qualification				
s. 47F(1)				
Proposed appointment date with the department	Scheduled date of final health inspection			
16/01/2023	15/01/2023			

## Section G: Pre-export isolation

### 11 Will your animal/s require pre-export isolation?

- Yes (go to question 12)
- No (go to question 13)

### 12 Isolation/establishment details

Expected arrival date	Expected departure date		
Title	Given name (s)	Family name	
Establishment name			
Email	Phone		
Address			
Suburb/town/city	State/Territory	Postcode	



## Section H: Preparation for export

### 13 Where were the importing country conditions sourced from?

- MICoR
- Import permit
- Other (please specify)

If the importing country requirements have been sourced from the import permit a certified National Accreditation Authority for Translators and Interpreters (NAATI) translated copy in English must be attached with your application.

- A certified NAATI (level 2/3) translated copy of the import permit or importing country requirements is attached (if required)

### 14 As part of the preparation for export, I declare:

- Animal/s will be tested, treated, and inspected according to importing country requirements
- Testing and treatment schedule is attached (if applicable)

## Section I: Additional information

### 15 Please provide a summary of supporting documents attached and any documents still to be submitted.

## Section J: Applicant declaration

### To be completed by the individual listed in Section B.

I declare that I have authority to make this declaration for and on behalf of the applicant.

I declare that the information I have provided is true and correct.

I understand that a person may commit an offence or be liable to a civil penalty if the person makes a false or misleading statement in an application or provides false or misleading information or documents (sections 136.1, 137.1 and 137.2 of the *Criminal Code* and sections 367, 368 and 369 of the *Export Control Act*).

I understand that under section 66, section 240 and section 244 of the *Export Control Act*, I am required to, as soon as practicable, provide the department with additional or corrected information, if I become aware that information included in this application changes, is incomplete or incorrect.

Signature (enter signature or type your name)

Date (dd/mm/yyyy)

s 47F(1) C/O s 47G(1)

15/12/2022

Full name

s 47F(1)

## FORM 4

## Rabies Vaccination Certificate

## 1. Owner details

a)	Owner:	s 47F(1)
b)	Address:	s 47F(1) s 47F(1)

## 2. Animal details

a)	Name:	PP
b)	Microchip Number /Tattoo:-	s 11C(1)(a)
c)	Scan/Implant date:	16/12/2022
d)	Location of microchip	BETWEEN THE SHOULDER BLADES
e)	Species:	CANINE
f)	Sex:	<input type="checkbox"/> Female <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Entire <input type="checkbox"/> Desexed
g)	Age/Date of Birth:	01/06/2018
h)	Breed:	GREYHOUND
i)	Colour:	BLACK AND WHITE

## 3. Vaccination details

I the undersigned veterinarian declare that I have vaccinated the animal described above as follows:

a)	Date of Vaccination:	16/12/2022	Vaccine Label:
b)	Name of Vaccine:	Intervet Nobivac Rabies	
c)	Batch Number:	A586B02	
d)	Expiry Date:	09/2025	
e)	Based on the manufacturer's recommendation, booster vaccination for this animal is due on:	16/12/2025	

## 4. Registered Veterinarian

a)	Name:	s 47F(1)
b)	Veterinary Board Registration Number:	s 47F(1)
c)	Signature:	s 47F(1)
d)	Date:	16/12/2022
e)	Address:	s 47G(1) s 47G(1)

## 5. Endorsement by Government Veterinarian

a)	Name:	Stamp:
b)	Veterinary Board Registration Number:	
c)	Authorised Officer Number:	
d)	Date:	
e)	Signature:	

Notes: Sections 1 – 4 to be completed before signing by the Registered Veterinarian administering the vaccine.  
Section 5 to be completed by the Government Veterinarian issuing the official Health Certificate and Export Permit