

日本国農林水産省
輸 出 検 疫 証 明 書
 日本国农林水产省
出 口 検 疫 証 書
EXPORT QUARANTINE CERTIFICATE
 Ministry of Agriculture, Forestry and Fisheries, Japanese Government

検疫証明書番号
 检疫证书编号
 Certificate NO.

申請者住所
 申请人地址
 Address of applicant

発行年月日
 签发日期
 Date of issue

氏名(法人にあつては、その名称及び代表者の氏名)
 姓名(如果是法人, 请填写其名称和代表的姓名。)
 Name (In case of juridical person, state its title and name of representative)

下記は、家畜伝染病予防法の規定に基づく検査の結果、家畜の伝染疾病の病原体をひろげるおそれがないことを証明する。

兹证明, 经过基于家畜传染病预防法的有关规定实施检查, 下列动物不存在传播动物传染病病原体的风险。

This is to certify that the undermentioned animals are free from any evidence of disseminating causative agent of any animal infectious disease in consequence of the inspection referred to the Domestic Animal Infectious Disease Control Law.

動物の種類及び品種 / 动物名称及品种 Species of animal		
頭 数 / 总 头 数 Total head of animal		
区 分 / 分 類	性 別 / 性 別 Sex	
	年 令 別 / 年 齡 Age	
	用 途 別 / 用 途 Use	
生 産 地 / 原 産 地 Country of origin		
荷 送 人 住 所 氏 名 / 发 货 人 名 称 及 地 址 Name and address of consignor		
荷 受 人 住 所 氏 名 / 收 货 人 名 称 及 地 址 Name and address of consignee		
と う 載 地 及 び と う 載 年 月 日 / 装 运 日 期 及 地 点 Date & place of shipment		
と う 載 船 舶 (航 空 機) 名 / 装 載 船 (航 班) 名 Name of ship or flight		
け い 留 期 間 / 隔 离 检 疫 期 間 Quarantine period		
検 査 方 法 及 び 結 果 / 检 査 方 法 及 结 果 Method & result of inspection		
備 考 Remarks	備 注 兹证明, 牛瘟病毒是1925年以后, 口蹄疫是2010年7月以后, 牛传染性胸膜肺炎是1942年以后, 在日本至今没有发生。 It is certified that there has been no outbreak of Rinderpest since 1925, Foot and Mouth Disease since July 2010 and Contagious Pleuro-Pneumonia of cattle since 1942 in Japan.	

農林水産省動物検疫所
 农林水产省动物检疫所
 Animal Quarantine Service

家畜防疫官
 动物检疫官
 Animal Quarantine Officer

氏名 / 簽字
 (Signature)

印章
 (Seal)

MINISTRY OF AGRICULTURE, FORESTRY AND FISHERIES OF JAPAN

日本农林水产省

VETERINARY HEALTH CERTIFICATE FOR THE IMPORTATION OF
HORSES INTO CHINA /输华马的兽医卫生证书

FOR THE PERMANENT ADMISSION OF REGISTERED HORSES INTO P. R. CHINA
FROM JAPAN /适用于从日本向中国永久出口的注册马

No. of certificate /证书编号: _____

Import permit No. /进口检疫许可编号: _____ (issued by AQSIQ)

Exporting Country/出口国: JAPAN

Competent Service/签发部门: Animal Quarantine Service

Quantity of the export horses /出口马匹数量: _____ heads

I. IDENTIFICATION OF THE HORSES /马匹身份信息

SEE ANNEX (including vaccine information)/参照附件(含疫苗信息)

II. ORIGIN OF THE HORSES /原产地

(a) Name and address of consignor/发货人名称及地址:

Name/名称: _____

Address/地址: _____

(b) Name and address of pre-export isolation premise described in IV. (e) /IV(e) 中记载的隔离检疫场的名称及地址:

Name/名称: _____

Address/地址: _____

(c) Name and address of farms of origin described in IV. (d) /IV(d) 中记载的饲养农场的名称及地址:

Name/名称: _____

Address/地址: _____

III. DESTINATION OF THE HORSES /目的地

(a) Date of embarkation /装船日期: _____

(b) Name and address of consignee/收货人姓名及地址:

Name/姓名: _____

Address/地址: _____

(c) Means of transportation/运输方式: _____

(d) Name of ship or flight/装载的船名(航班名): _____

(e) Port of Departure/出发港口: _____

(f) Port of Arrival/到达港口: _____

IV. HEALTH INFORMATION /健康信息

I, the undersigned, an official veterinary officer authorized by the competent veterinary authority of Japan to certify horses for export, hereby declare that: /本人作为签署人, 是日本兽医主管部门批准的可签发出口马证书的官方兽医, 特声明如下事宜。

- (a) All the requirements of quarantine and inspection stipulated in the protocol have been met./ 完成了议定书规定的检验检疫要求。
- (b) MAFF officially confirms that Japan is free from African horse sickness, melioidosis, Equine piroplasmiasis, Horse pox, Trypanosomiasis (including Dourine, Nagana and Surra), Venezuela equine encephalomyelitis, Equine encephalomyelitis (Eastern and Western), Epizootic lymphangitis and glanders./农林水产省确认日本没未发生过非洲马瘟、类鼻疽、马梨浆虫病、马痘、锥虫病(包括马媾疫、刚果锥虫病和苏拉病)、委内瑞拉马脑脊髓炎、马脑脊髓炎(东部型和西部型)、马流行性淋巴管炎及马鼻疽。
- (c) The farms of origin where the export horses originate had met the following requirements: / 输出马的原饲养场符合以下条件。
 - (1) There have been no evidence of equine infectious anaemia, Contagious equine metritis, Equine rhinopneumonitis, equine influenza, Equine paratyphoid (Salmonella abortus equi) and Japanese encephalomyelitis for at least 2 years. /在过去至少2年内, 没有发生马传染性贫血、马传染性子宫炎、马鼻肺炎、马流感、马副伤寒(马流产沙门氏菌)及日本脑炎。
 - (2) No horses suspected of being infected with the notifiable diseases in Japan have been introduced for the past 2 years at least. /至少在过去2年内, 未引进疑有感染日本国申报疾病的马。
- (d) The exported horses have been reared since the birth in the farms complying with above (c). Or (if imported from other countries) The exported horses had been reared for at least 6 months in Japanese exporting farm where there is no outbreak of the disease specified in above (c)-(1) during the period./输出马在日本出生并一直在符合上述(c)要求的农场饲养; 如果是从其它国家引进的, 则引进马至少在日本输出马饲养场饲养6个月, 在此期间, 未发生上述(c)(1)所述疾病。
- (e) Within 30 days prior to entry into the isolation premises, the horses to be exported were kept in isolation in the farms of origin, and were subjected to clinical examination and found to be free from clinical signs of contagious and infectious diseases, as well as the following tests for the corresponding diseases in the laboratory approved by MAFF with negative results. /在进入隔离检疫场前30天内, 对输出马在原饲养场进行隔离检疫, 其临床检查结果未发现疑为传染病的临床症状, 且在日方批准的实验室进行下列疾病检查, 其结果均为阴性。

Name of address of laboratory: /实验室名称及地址

Name: /名称

Address: /地址

(1) Equine infectious anaemia /马传染性贫血 : Agar gel immunodiffusion test with negative result /琼脂凝胶扩散试验 阴性

Date of sampling /采样日期

Result /结果

(2) Equine paratyphoid (*Salmonella abortus equi*) /马副伤寒 (马流产沙门氏菌) : Tube agglutination test, negative at 1:320 of serum dilution /试管凝集试验 1 : 320 稀释阴性

Date of sampling /采样日期 Result /结果

_____ (at 1:320 of serum dilution) / (1: 320 稀释)

(3) Equine viral arteritis /马病毒性动脉炎: Serum neutralization test, negative at 1:4 dilution /血清中和试验 1: 4 稀释阴性

Date of sampling /采样日期 Result /结果

_____ (at 1:4 dilution) / (1: 4 稀释)

(4) Contagious equine metritis/马传染性子宫炎: Bacterial culture examination for samples collected from reproductive organs (the castrated horses are exempted from the bacterial culture) /从生殖器官采集的样本进行细菌培养检查 (阉马不做细菌培养)

*Date of sampling /采样日期 *Result /结果

(5) Equine rhinopneumonitis/马鼻肺炎:

*For non-vaccinated horse, a serum neutralization test at 1:2 dilution with negative result /未免疫的马匹, 做血清中和试验1 : 2 稀释 阴性

Or

*For vaccinated horse, two serum neutralization tests at 14 days interval, negative with the second serum not more than 4-fold increase in titre. /已免疫的马匹, 做两次血清中和试验, 采血间隔14天, 第二次试验结果不高于第一次试验结果的四倍为阴性。

Date of sampling /采样日期 Result /结果

*Delete as appropriate /根据需要删除. (with the second serum not more than 4-fold increase in titre) / (第二次试验结果不高于第一次试验结果的四倍为阴性)

(6) Equine influenza /马流感:

Two haemagglutination inhibition tests at 14 days interval, negative with the second serum not more than 4-fold increase in titre. /做两次血凝抑制试验, 采血间隔14天, 第二次试验结果不高于第一次试验结果的四倍为阴性。

Date of sampling /采样日期 Result /结果

(with the second serum not more than 4-fold increase in titre) / (第二次试验结果不高于第一次试验结果的四倍为阴性)

- (7) Equine leptospirosis (*L.pomona*, *L.autumnalis*) /马钩端螺旋体病 (波摩那型和秋季型):
Microscopic agglutination test(MAT), negative at 1:100 dilution. /微量凝集试验血清稀释1:
100为阴性

Date of sampling /采样日期

Result /结果

(at 1:100 dilution) / (1: 100 稀释)

- (f) Prior export to China, the negative horses passed the inspection and quarantine in the farms of origin were put under quarantine for at least 30 days in the isolation premises approved by MAFF. /在向中国输出前, 在原饲养场检疫为阴性的马方可进入日方批准的隔离检疫场集中隔离检疫至少30天。
- (g) In the isolation premises, there were no other animals raised. /隔离检疫场内不得同时饲养其他任何动物。
- (h) Before horses to be exported entering into the isolation premises, all facilities in the premises were cleaned and disinfected, and the precaution measures have been taken to prevent insect vectors contacting with the horses to be exported. /在输出马进入隔离检疫场前, 隔离检疫场所有设施必须完全清洁和消毒, 并采取预防措施防止媒介昆虫接触输出马。

Medicine name /药品名称: _____

Effective ingredient /有效成分: _____

Manufacturer /制造商: _____

Dosage /剂量: _____

Place /地点: _____

Date /实施日期: _____

Person in charge /负责人: _____

- (i) During the quarantine period, all horses were examined clinically one by one and found to be healthy and free of any signs or evidence of infectious and contagious diseases and subject to the following tests: /在隔离检疫期间, 对输出马逐匹进行临床检查, 没有传染病的临床症状。并进行了如下检查。

Name and address of laboratory: /实验室名称及地点

Name /名称: _____

Address /地点: _____

- (1) Equine infectious anaemia/马传染性贫血: Agar gel immunodiffusion test with negative result /琼脂扩散试验阴性

Date of sampling /采样日期

Result /结果

- (2) Equine paratyphoid (*Salmonella abortus equi*) /马副伤寒 (马流产沙门氏菌): Tube agglutination test, negative at 1:320 of serum dilution /试管凝集试验 1: 320 稀释阴性

Date of sampling /采样日期

Result /结果

(at 1:320 of serum dilution) / (1: 320 稀释)

- (3) Equine viral arteritis /马病毒性动脉炎: Serum neutralization test, negative at 1:4 dilution / 血清中和试验 1:4 为 阴性

Date of sampling /采样日期 Result /结果

(at 1:4 dilution)/(血清1: 4 稀释)

- (4) Contagious equine metritis /马传染性子宫炎: Bacterial culture examination for samples collected from reproductive organs (the castrated horses are exempted from the bacterial culture) /从生殖器官采集的样本进行细菌培养检查 (阉马不做细菌培养)

*Date of sampling /采样日期 *Result /结果

- (5) Equine rhinopneumonitis /马鼻肺炎:

*For non-vaccinated horse, a serum neutralization test with negative result (titre of not more than 1:2) /未免疫的马匹, 做血清中和试验1: 2 稀释阴性

Or /或

*For vaccinated horse, two serum neutralization tests at 14 days interval, negative with the second serum not more than 4-fold increase in titre. /已免疫的马匹, 须做两次血清中和试验, 采血间隔14天, 第二次试验结果不高于第一次试验结果的四倍为阴性。

Date of sampling /采样日期 Result /结果

(with the second serum not more than 4-fold increase in titre) /
(第二次试验结果不高于第一次试验结果的四倍为阴性)

*Delete as appropriate. /根据需要删除

- (6) Equine influenza: /马流感

Two haemagglutination inhibition tests at 14 days interval, negative with the second serum not more than 4-fold or greater increase in titre. /做两次血凝抑制试验, 采血间隔14天, 第二次试验结果不高于第一次试验结果的四倍为阴性。

Date of sampling /采样日期 Result /结果

(with the second serum not more than 4-fold increase in titre) /
(第二次试验结果不高于第一次试验结果的四倍)

- (7) Equine leptospirosis (*L.pomona*, *L.sutumnalis*): /马钩端螺旋体病 (波摩那型和秋季型)

Medicate twice with dihydrostreptomycin at a dosage of 25mg/kg at an interval of 14 days /用双氢链霉素进行两次预防治疗, 间隔时间14天, 每次用量按25mg/kg体重。

Date of medication /实施日期

AND _____

- (j) During the quarantine period, under the supervision of an official veterinarian of MAFF, the exported horses were treated, against internal and external parasites using MAFF approved effective parasiticides. /在隔离检疫期间, 在农林水产省官方兽医的监督下, 对输出马用农林水产省批准的有效杀虫剂、驱虫药驱除马的体内外寄生虫。

(1) Internal parasites /体内寄生虫

Medicine name /药品名称: _____
 Effective ingredient /有效成分: _____
 Manufacturer /制造厂商: _____
 Dosage /剂量: _____
 Place /地点: _____
 Date /实施日期: _____
 Name and address of veterinarian /兽医姓名及地址: _____

(2) External parasites /体外寄生虫

Medicine name /药品名称: _____
 Effective ingredient /有效成分: _____
 Manufacturer /制造厂商: _____
 Dosage /剂量: _____
 Place /地点: _____
 Date /实施日期: _____
 Name and address of veterinarian /兽医姓名及地址: _____

- (k) During the transportation from the isolation premises to shipment to China, MAFF strictly ordered the transportation contractor the following contents. /在自隔离场直至向中国发运的运输期间, 农林水产省对运输商就以下事项进行严格要求。

(1) Effective precaution measures were taken to keep insect vectors out. /采取有效预防措施, 驱除媒介昆虫。

Medicine name /药品名称: _____
 Effective ingredient /有效成分: _____
 Manufacturer /制造厂商: _____
 Dosage /剂量: _____
 Place /地点: _____
 Date /实施日期: _____
 Person in charge /负责人: _____

(2) The fodder and feed came from the non-epizootic area and contained no pathogen of animal infectious and contagious diseases. /所用的所有饲料、垫草来自非疫区, 不含动物传染病的病原。

Production place /产地: _____
 Disinfection date /消毒日期: _____
 Method /消毒方法: _____
 Medicine /药品名称: _____
 Effective ingredient /有效成分: _____

- (3) The transportation of horses did not pass the epizootic area and the contact with other animals is not permitted. /输出马的运输未经过动物传染病的疫区，未与其他动物接触。
- (4) One means of transportation only shipped one consignment of horses exported to China, and no other animals was shipped in the same conveyance. Otherwise, the horses arrived at the Chinese port of entry will be unloaded, and be returned by the original means of transport. /同一运输工具只运送向中国出口的一批马，未与其他动物同一运输工具运输。否则，马匹运抵中国入境口岸时，将不准卸离运输工具并经原运输工具退回。
- (5) All the crates, vehicles and cargo areas to be used for the transportation of the horses were cleaned and disinfected, under the supervision of an official veterinarian of MAFF, with the effective disinfectants approved by MAFF. /所有运输出口马的装箱、运输工具及动物装载区均在农林水产省官方兽医的监督下用农林水产省批准的消毒药进行清洗、消毒。

Medicine name /药品名称: _____
 Effective ingredient /有效成分: _____
 Manufacturer /制造厂商: _____
 Dosage /剂量: _____
 Place /地点: _____
 Date /实施日期: _____
 Person in charge /负责人: _____

Date /日期	Place /地点	Stamp and signature of the official veterinarian /印章及官方兽医签名

Animal Quarantine Officer /动物检疫官
 (Name in block letters, qualification and title) / (印刷体的姓名、资格及职位)

- (1) Within 24 hours prior to export, the horses were examined and found to be free from clinical signs of infectious and contagious diseases. /在出口前24小时内，输出马经临床检查，没有传染病的临床症状。

Date /日期	Place /地点	Stamp and signature of the official veterinarian /印章及官方兽医签名

Animal Quarantine Officer /动物检疫官
 (Name in block letters, qualification and title) / (印刷体的姓名、资格及职位)

DECLARATION /声明

I, the undersigned, _____ declare: /本人 _____ 作为签署人特声明如下。
(Name in block letters) / (印刷体的姓名)

1. I will use the fodder and feed which come from the non-epizootic area and contain no pathogen of animal infectious and contagious diseases. /所用的所有饲料、垫草应来自非疫区，不含动物传染病的病原体。
2. I will ship the horses from an isolation premises to China directly according to the transportation plan document submitted before. /将遵从预先提交的运输计划，从隔离场直接将马匹运往中国。
3. I will ship the horses with no other animals in the same conveyance. /不与其它动物使用同一运输工具运输马。
4. I will clean and disinfect with a MAFF approved disinfectant all the crates, vehicles and cargo areas to be used for the transportation of export horses. /所有运输出口马的装箱、运输工具和动物装载区均使用农林水产省批准的消毒药进行清洗、消毒。

(Place, Date) / (地点、日期)

Place /地点: _____

Date /日期: _____

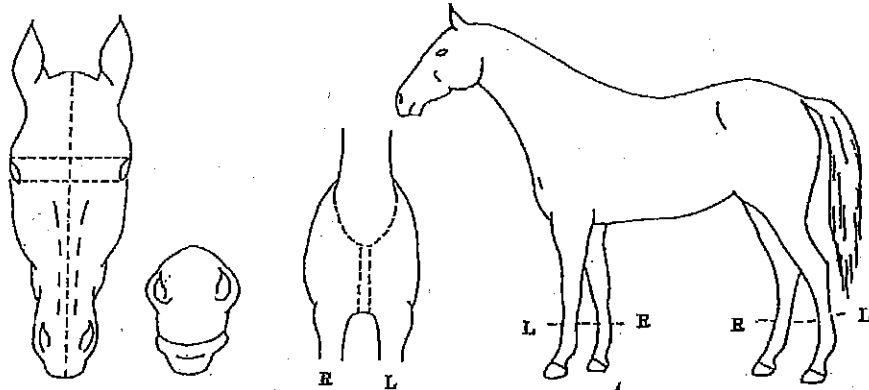
(Signature) / (签字)

ANNEX: IDENTIFICATION and VACCINE RECORD OF THE HORSES /附件: 马匹身份信息及疫苗接种经历

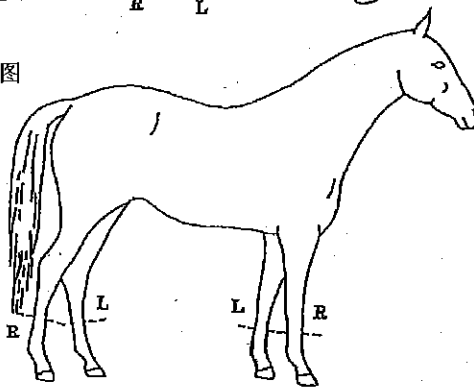
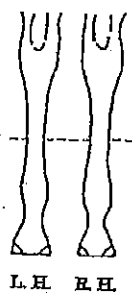
Certificate No.: /证书编号

Quarantine No./检疫编号	Name /名称	Microchip number*/芯片编号	Passport number*/护照编号	Breed /品种	Age /年龄	Color /毛色	Sex /性别	Country of Origin /原产地	Vaccine for (disease name) /疫苗种类(疫病名)	Manufacture of vaccine /疫苗制造厂商	Date of Vaccination /疫苗接种日期	Valid Period /有效期间
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
Type of vaccine: /疫苗种类 Dosage: /剂量												

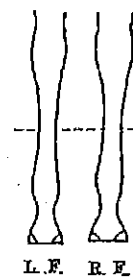
* If applicable. /如适用



Hind Rear View /后肢背面图



Fore Rear View /前肢背面图



NAME /姓名	
SIRE /父种马	DAM /母种马

COLOR /毛色
SEX /性别
DATE OF BIRTH /出生年月

HEAD /头部		
LIMBS /四肢	L.F. /左前肢	
	R.F. /右前肢	
	L.H. /左后肢	
	R.H. /右后肢	
BODY /躯干		
ACQUIRED /后天特征		