

Annex

Self-declaration – border near activities Norway and Sweden

Identification of the horse(s)

Horse No.	UELN	Microchip No. if available	Reg. No. of establishment where the horse is habitually kept
1			
2			
3			

Purpose of the journey

Date of departure:		Date of planned return to country of origin:	
The border near activity the horse(s) shall participate in; a) recreational use, b) exhibitions, competitions, cultural events or training for these, c) grazing, d) work			
Horse (No.)		Type of activity (letter a-d)	
Establishments visited during the journey (if applicable), specify if different for different horses			
Date (from-to)	Horse (No.)	Address	Registration number of the establishment

Transporter (if applicable)

Name	Date of birth/Org. No.	Phone No.
Address	Postal No.	City
Private transporter and/or Commercial transporter	Registration Number:	
	Approval Number:	
Means of transport	Registration Number	

Signature

I hereby declare that the horse(s) that are being moved: <ul style="list-style-type: none">– do not show any sign of contagious diseases– have not had any contact with other horses of lower health status the last 15 days before the movement– are in a condition fit for transport according to animal welfare regulations.

- do origin from a registered establishment.
- do not origin from an establishment with abnormal mortalities with an undetermined cause.
- do not origin from an establishment with movement restrictions for horses.
- do not origin from a restriction zone for controlling diseases in horses.

I declare that I will implement measures to avoid contact between the horse(s) that are moved and other horses showing signs of contagious diseases during the journey.

Date	Name in capital letters
Place	Signature