

RWANDA – Hatching Eggs

Ik, Dr(s):
I, Dr.:

Veterinair practicus van:
Veterinary Physician of:

Intranummer:
Intra number:

Farm No.: **VB** **- NL**
Farm No.:

Naam:
Name:

Adres:
Address:

Postcode:
Zipcode:

Woonplaats:
Place:

Verklaar hierbij / Hereby declare:

The farms of origin of the (grand) parentstock have been free from pullorum-typhoid disease, during the last 12 months prior to egg collection for this shipment.
In the farms of origin of the (grand) parentstock no clinical symptoms have been seen of Marek's disease and infectious bursal disease (IBD), during the last 6 months prior to egg collection for this shipment.

In the farms of origin of the (grand) parentstock no clinical symptoms have been seen of epidemic tremor (avian encephalomyelitis), avian tuberculosis, avian leucosis and osteoporosis, during the last 12 months prior to egg collection for this shipment.

Aldus verklaard / Declared:

Datum:
Date:

te:
at:

(Handtekening / Signature)

(naam & stempel / name & stamp)