Annex 8c

**Republic of Namibia**
**MINISTRY OF AGRICULTURE, WATER AND RURAL DEVELOPMENT**
**8c**

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**DIRECTOR OF VETERINARY SERVICES**
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**Windhoek**
**Namibia**

**Permit no.: G (RSA).....** **Ref. no.: V 13/1/3/2/1 /2**

# VETERINARY PERMIT/NO OBJECTION FOR THE IMPORTATION OF WILDEBEESTE FROM SOUTH AFRICA (for premises with approved camps)

(Issued in terms of the Animal Diseases and Parasites Act, 1956, as amended)

**Authority is hereby granted to:**

Name (owner of animals).....

Address:.....

.....Telephone : .....

To import:.....**From** (farm name) .....in the

.....province **TO**.....*in the*
(farm name and number)
..... district through .....border post

**Subject to the following conditions:**

1. **The importer accepts the sole responsibility for ensuring that the conditions below have been complied with, and understand his/her duty in this regard.**
2. That the animals do not originate from **Mpumalanga, Kwazulu Natal or the Northern Provinces** of South Africa or any other area which is under veterinary restriction for diseases. The animals were either born and raised in the province or were resident there for a period of at least **six months** before export to Namibia.
3. The wildebeest must be transported directly to the veterinary approved wildebeest camp on the farm .....*(name and number)* and may not be removed from that place alive without permission from the relevant State Veterinarian Office. This serves also for the progeny of these animals.
4. Immediately before departure, all of the game must be treated with:
   i) A registered broad-spectrum anthelmintic against roundworms.
   ii) A registered tickicidal agent with residual effect.
5. The animals shall be accompanied by this **ORIGINAL** import permit and the health certificate overleaf must be completed in full and signed by an official veterinarian authorised thereto by the national veterinary administration.
6. The arrival of the consignment must be timeously reported to the State Veterinarian

   ....., Telephone ..... and the seals may not be broken or the animals released without his/her permission. Supervision of off-loading will be at importer's cost.
7. The animals shall be transported in sealed trucks. Seal numbers should appear on the Veterinary Certificate.

8.This permit is valid until ..... and for one movement only.

**DIRECTOR VETERINARY SERVICES**

**PLEASE NOTE - Imports are subject to compliance with Nature Conservation legislation.** **(8a-G.06/02)**

**VETERINARY HEALTH CERTIFICATE IN RESPECT OF Wildebeest FROM THE REPUBLIC OF SOUTH AFRICA TO NAMIBIA.**

**Namibian Permit Number** ..... **Ref Number** .....
(consecutive serial number)

**Issuing Authority : RSA Directorate Animal Health**

**Country of Origin**: Republic of South Africa

A. **Description of animals**

1. Number and description

| Number | | Sex | Identification marks (tag number, brand, tattoo) |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

2. 0 **Origin of animal(s)**

2.1 **Name and address of exporter**: .....

.....

Telephone Number ..... Fax Number .....

**2.2 Premises of origin**

Farm name and number ..... District .....

**3.0 Destination of animals**

3.1 **Name and address of consignee** .....

.....

Telephone Number ..... Fax Number .....

3.2 **Physical address at destination**

Farm/abattoir name and number.....District .....

4. **Means of transportation** (air, road, rail) .....

4.1 Description of transport vehicle (flight number, Registration number) .....

.....

**Note: A copy of this import permit must be faxed to the State Veterinarian at destination in Namibia as indicated on page 1 paragraph 4 of the import permit**

# VETERINARY HEALTH CERTIFICATE

I, ..... a veterinarian authorized thereto by the Veterinary Authority of South Africa hereby certify that:

1. The wildebeeste originate from ..... in

   the .....province, an area which is not under restriction for any disease to which the species are susceptible. The animals were kept at the premises of origin since birth or at least for the past six months. **During this period the animals to be exported did not come into contact with any animals from Mpumalanga, Kwazulu Natal or Northern Province.** ,

2. Immediately prior to departure the animals were treated with (as applicable):(**give name, route and dose**)

   **2.1.** A registered broad-spectrum anthelmintic against roundworms. .....

   ..... .....

   **2.2.** A registered tickicidal agent with residual effect for animals from heart water areas.....

   .....

3. Description of animals: (species, sex, numbers):
   .....

   ..... .....

   .....

   .....

   .....

   .....

4. The animals were **inspected on the day of loading** and found healthy and fit to travel. Animals were loaded onto clean trucks which were sealed under official veterinary supervision.

   Vehicle Registration number/s:
   .....

   Seal number(s):.....

5. Done at ..... on .....

   Signature .....
   **AUTHORIZED VETERINARIAN**

NAME IN FULL (PRINT) ..... .....

ADDRESS: .....

.....

..... **OFFICIAL STAMP**