

**Department of Agriculture**

**National Directorate Animal Health**


**Notice No. VPN/07/2007-01**

**To: STATE VETERINARY OFFICERS**

**Subject: Standard for the registration or re-registration of a crocodile farm for export status.**

- PART I:** Registration of a crocodile farm for export status
- PART II:** Listing of registered farms and the maintenance of export registrations.
- PART III:** Other Veterinary Procedural Notices applicable for the export of crocodile meat
- ANNEX A:** Application for registration of a farm
- ANNEX B:** Inspection Report by Provincial State Veterinarian (PSV)
- ANNEX C:** Registration certificate for a farm for export
- ANNEX D:** Example of format of data to be forwarded to the National Directorate
- ANNEX E:** Attestation of Origin
- ANNEX F:** Health Attestation by issuing PSV
- ANNEX G:** Monthly livestock report
- ANNEX H:** Post mortem examination reports
- ANNEX I:** Drug stock registers
- ANNEX J:** Drug applications records

THIS VPN/07/2007-01 REPLACES VPN/07/2006-03

  
.....  
**Dr. Mpho Maja**  
**Director: Veterinary Services**

2007-12-06  
.....  
**Date**

## **PART I: REGISTRATION OF CROCODILE FARMS FOR EXPORT STATUS**

### **APPLICATION FOR REGISTRATION OF FARMS FOR EXPORT**

1.
  - i. The owner of the farm must apply in writing (using Annex A of VPN/07) for a registration certificate issued by the Provincial Executive Officer (PEO) if he/she wishes to register or re-register a farm with the intent to supply crocodiles for slaughter at an abattoir approved to export meat.
  - ii. The application form together with the minimum requirements as described in the VPN/07 for a veterinary approved farm is obtainable from the Provincial State Veterinarian (PSV) in whose area the farm is located..
  - iii. Having acquainted him/herself with the above requirements the application must be completed and submitted to the PEO through the State Veterinarian(s) office in whose area the farm is located.  
Only the owner or his authorised signatory/person responsible for the farm may sign the application.
  - iv. The application must be accompanied by the prescribed fee.
  - v. State Veterinarian must explain in person to the owner what the implications are regarding the commitments and obligation the owner undertakes to do/not to do in the application.

### **STANDARDS APPLICABLE TO EXPORT FARMS**

- 2.1 Crocodiles must have remained in the Republic of South Africa for at least twelve (12) months before harvesting or since hatching in the case of crocodiles less than twelve (12) months old.
- 2.2 Crocodiles may not be harvested in an area where during the last 60 days there have been Animal Health restrictions because of outbreak of diseases to which crocodiles are susceptible (Refer to OIE listed infectious diseases).
3. Crocodiles must be transported from their farms of origin to the abattoir without contact with animals that do not comply with the conditions of export in a vehicle which has been cleaned and disinfected before loading.
4. A sketch plan of the farm, indicating camps, pens, restraining and handling facilities, buildings, fences, surrounding structures and activities must be available for inspection purposes. (Aerial photographs may help in this regard).
5.
  - i) All crocodiles must be handled in accordance to the Livestock Welfare Coordinating Committee (LWCC) codes of Practice.
  - ii) The farm must have facilities for the easy and humane handling of animals.
6. The owner or person responsible for the farm must commit him/herself, in writing, that he/she will:
  - i. Notify the PSV promptly of any disease outbreak on the farm,
  - ii. Not administer or feed production enhancers / growth stimulants or any substance that is a Beta agonist or has an oestrogenic, androgenic, gestagenic or thyrostatic effect to any crocodiles or allow such agents to be administered or fed,
  - iii. Comply with the control measures imposed by the PSV if an outbreak of a controlled animal disease should occur on the farm,

- iv. Observe withdrawal periods of any therapeutic remedies used,
  - v. Keep register of all treatments (min 3 months required)
  - vi. Submit all livestock or game that die on the farm to a veterinarian for post-mortem examination except where obvious reasons for death can be given.
  - vii. Inform the PSV of all undiagnosed deaths.
  - viii. Allow the PSV to inspect any animals and take any sample(s) from animals on the farm as he/she deems necessary,
  - ix. Keep records as prescribed in paragraphs 8-13 of the VPN/07. Electronic records must be printed regularly,
7. All crocodiles bought in or otherwise acquired must comply with the following requirements:
- i. Be declared and recorded in the Monthly Stock Report (par 8).
  - ii. Be in possession of a movement permit and attestation of origin (Annex E) issued by the PSV in the district of origin and the Health Attestation (Annex F) that these animals had come from a farm located in the FMD free zone in SA. Nor were there any restrictions imposed on movements due to the occurrence of notifiable diseases (OIE listed diseases).
  - iii. May not be sent for slaughter within 3 months of arrival on the farm.
8. A Monthly Livestock Report for all crocodile on the farm must be kept up to date monthly and must provide the following details:
- i. Registration number of farm
  - ii. Farm name
  - iii. Year
  - iv. Month
  - v. Stock – beginning total
  - vi. Plus: Crocodiles hatched on the farm
  - vii. Plus: Crocodiles bought in or otherwise acquired
  - viii. Minus: Mortalities
  - ix. Minus: Sold
  - x. Minus: Slaughtered
  - xi. Stock: End total
- (See Annex G for example)
9. A Post Mortem Record file for all crocodiles that died on the farm must be kept and must provide the following details:
- i. Registration number of farm
  - ii. Farm name
  - iii. Date of death
  - iv. Post-mortem/ Laboratory Findings.
  - v. Official verification (Including copies of post mortem reports where applicable)
  - vi. Check by veterinary department

(See Annex H for example)

10. Drug Stock Records must be kept, must be up to date (updated at least quarterly from therapy and purchase records) and must contain the following details:

- i. Registration number of farm
- ii. Farm name
- iii. Product name for each product in stock
- iv. Expiry date for each product
- v. Withdrawal period for each product
- vi. Stock volume for each product
- vii. Official veterinary verification signature
- viii. Check by veterinary department

(See Annex I for example)

11. Drug Application Records for livestock must be kept, must be up to date and must contain the following details:

- i. Registration number of farm
- ii. Farm name
- iii. Product name
- iv. Date applied
- v. Reason for use
- vi. Withdrawal period
- vii. Withdrawal period ends
- viii. Isolation arrangements (includes marks)
- ix. Official veterinary verification signature
- x. Check by veterinary department

(See Annex J for example)

12. An auditable and documented Animal Health and Management Programme (also known as Good Farming Practices GFP's) must be drawn up and implemented. This should include vaccinations, anthelmintic treatments, external parasite treatments, mineral-, vitamin- and nutritional supplementations and other on-farm procedures (docking, castration, breeching etc.), as well as any other records that may relate to the quality of the livestock presented for slaughter.

13. A file with Official Inspection Reports must be kept.

14. All records must be available on request by the PSV.

15. The registration of a farm is not transferable to new management or between different farms under control of one management.

16. The approval is subject to the maintenance of prescribed standards. The PEO may at any time cancel approval if the farm does not conform to export requirements.

## OFFICIAL INSPECTION, APPROVAL AND REGISTRATION OF FARMS

17. Having received the application (Annex A) the PEO will inspect the farm for export approval.
18. The basis for export approval will be the requirements set by the importing country as well as the minimum requirements for a veterinary approved farm, as specified in VPN/07 Standard for the registration or re-registration of a crocodile farm for export status.

See paragraph 2 of this document for a veterinary approved farm.

19. The PSV will be responsible for the following actions/procedures:
  - a) Acquaint himself/herself with the minimum requirements in VPN/07 for a veterinary approved export crocodile farm.
  - b) Inspect the farm and complete an inspection report (Annex B) with appropriate comments.
  - c) If the farm does not comply with the requirements the PSV must provide the owner with a report stating the reasons why the farm can not be approved.
  - d) Arrange for another inspection when the owner notifies the PSV that all the requirements recorded in paragraph 19c. had been met.
  - e) The PSV must verify that the farm, animals and farming practices meet the **STANDARDS AS GIVEN IN THE VPN/07**. Export approval will only be considered if the standards and prescribed management systems are in place.
  - f) Upon approval of the farm the PSV must allocate a registration number to the farm. The registration number must be made up as follows:

Example:

‡	‡	*	*	8	4	7	0	0	1
---	---	---	---	---	---	---	---	---	---

Type of farm‡:	‡OV	Sheep (Ovine)
Province number*	* 08	Western Cape
District number	847	Prince Albert
Farm number	001	1 <sup>st</sup> farm registered in that district (sequential)

Type of farm‡:

DY	Dairy farm
OV	Bovine(Bo),sheep (Ov), goat(Ca), pig(Po) or horse(Eq) farm
PO	Poultry farm
OS	Ostrich farm
WG	Wild game farm
CC	Crocodile farm

Province numbers\*:

Mpumalanga	01	KwaZulu-Natal	06
Gauteng	02	Eastern Cape Province	07
Limpopo Province	03	Western Cape Province	08
North West Province	04	Northern Cape Province	09
Free State	05		

Examples of district numbers:

801	Bellville
803	Caledon
847	Prince Albert
805	Beaufort West

The same number is used if the farm is registered for the export of other commodities e.g. Dairy, game, other red meat etc. However a separate application must be submitted with a different prefix for each species of animal.

- g) Geographic co-ordinates of the farm must be recorded:

#### **GEOGRAPHIC COORDINATES**

Farm longitude:	Degrees	dd	Minutes:	mm	<i>Seconds</i>	ss
E	:					
Farm latitude:	Degrees	dd	Minutes:	mm	<i>Seconds</i>	ss
S	:					

- h) The PSV will provide the owner of the farm with a Registration Certificate for export that corresponds in form and content to the model in Annex C.
- i) The PSV must keep record of all documents relating to the registration of farms on file:
- Farm name
  - Farm registration number
  - Copy of the sketch plan of the farm layout
  - Application for export: Annex A
  - Official Inspection reports (annually): Annex B
  - Copy of Farm Export Registration Certificate: Annex C (Annually)
  - Any relevant correspondence
- j) The PEO may de-list farms that no longer comply with the requirements for a veterinary approved farm following the same procedure as in paragraphs 19.c. and d.

## **PART II: LISTING OF REGISTERED FARMS**

20. All approved farms must be listed by the PSV for his/her area. The PSV must notify the PEO of each new farm registered, who will keep a central database for all farms registered in the province.
21. The list and notification to the PEO must (as a minimum) contain the following information for each registered farm:
- i. Registration number
  - ii. Name of owner
  - iii. Name of farm
  - iv. Postal address
  - v. Telephone number
  - vi. Fax number
  - vii. Province
  - viii. District
  - ix. Map co-ordinates
  - x. First registration date
  - xi. Current registration date (void if de-listed)
  - xii. Expiry date of export approval

(See Annex D for example)

22. Update data, as indicated in the example in Annex D, must be forwarded every 6 months to the Director: Veterinary Services (D.VS ), National Department of Agriculture (NDA):

23. **Requirements for Residue Monitoring.**

Refer to VPN/19 – for the standard relating to the National Residue Monitoring Programme.

- 23.1 All withdrawal periods of Veterinary Medicines must be adhered to. It is the farm owner / manager's responsibility to acquaint him/herself with the information regarding each product.

### **MAINTENANCE OF EXPORT REGISTRATION**

24. At least one inspection report per farm per annum must be available. The PSV must determine the frequency of additional inspections based on the animal health status in the Province or the area, as well as his/ her previous findings on the farm in particular, but visits will not be conducted at a frequency rate of less than two visits per annum. Regular documented visits by private practising veterinarians must be encouraged.

Farms that no longer comply with the requirements for an export registered farm must be delisted following the same procedure as in paragraph 19.c.and d.

25. The validity of export registration must be evaluated following each inspection.
26. Additional continuous duties of the PSV responsible for the area in which the farm of origin or approved abattoir is situated:
- The PSV must promote notification of outbreaks of notifiable disease and suspected outbreaks by colleagues in private practice and the general animal-owning public. Private practising veterinarians must be informed as to their responsibilities and obligations as regards the use, dispensing and record-keeping of animal remedies and the ban of the use of production enhancers / growth stimulants or any

substance that is a Beta agonist or has an oestrogenic, androgenic, gestagenic or thyrostatic effect on registered farms.

- Where necessary, those responsible persons who do not report outbreaks of notifiable animal diseases must be prosecuted.

#### **PROCEDURES FOR THE MOVEMENT OF CROCODILE FROM A REGISTERED FARM TO AN ABATTOIR OR OTHER EXPORT REGISTERED FARM**

27. The PSV must be able to certify that the crocodiles that leave the farm satisfy export requirements as prescribed in this policy.
28. When animals are dispatched from a registered farm to an export abattoir, another export farm or an export destination in another Province, the origin of crocodiles attestation Annex E and the health attestation in Annex F, must be issued by the State Veterinarian in the district where the farm of origin is situated. A copy of the health attestation should be sent to the PSV at destination. If the movement of crocodile takes place between the farm and an export abattoir, a copy of both the origin attestation Annex E and the health attestation in Annex F, must be forwarded to the certifying veterinarian at the abattoir.
29. The issuing PSV must record copies of all Health Attestations (Annex F) issued by him/her.
30. The attestation of origin and the health attestation must accompany the animal and be sent to the certifying veterinarian.



**PART III: OTHER VETERINARY PROCEDURAL NOTICES APPLICABLE TO THE EXPORT OF CROCODILE MEAT**

**32. Other Veterinary Procedural Notices applicable to the export of crocodile meat.**

- 32.1 VPN/14 Standard for ante-and post-mortem meat inspection and hygiene control at crocodile meat establishments.
- 32.2 VPN/15 Standard for the microbiological monitoring of meat.
- 32.3 VPN/16 Standard for the microbiological monitoring of water
- 32.4 VPN/17 Principles of Certification.
- 32.5 VPN/18 Law enforcement at export establishments.
- 32.6 VPN/19 Standard relating to the National Residue-Monitoring Programme.

## ANNEX A



### APPLICATION FORM

#### APPLICATION FOR REGISTRATION OF A CROCODILE FARM FOR EXPORT STATUS

1. To supply crocodile for slaughter at approved export establishments.
2. To participate in the national agricultural residue monitoring programme.
3. To participate in disease surveillance programmes when required.

#### A: PARTICULARS OF FARM AND OWNER

Name of Farm:	
Magisterial Area:	
State Veterinary Area:	
Name of owner:	
Postal address:	
Telephone:	
Fax:	
Cell number:	
E-Mail:	

#### B: PARTICULARS ABOUT FARMING OPERATIONS

Types of animals on farm	Yes	No	Indicate number of animals currently present on the farm
Cattle			
Sheep			
Goats			
Pigs			
Horses			
Poultry			
Ostrich			
Crocodile			
Wild game			
Other			

**C: Other Farming Activities**

Type	Yes	No
Crops		
Fruit		
Fodder		
Other		

D: Activities that may constitute a chemical risk:

**If yes:**

Type of industrial or mining activities:


Is direct or indirect animal exposure possible?


Does soil and/water contamination on your farm or in the area pose a chemical risk to meat obtained from slaughter stock?


**E. DECLARATION AND SIGNATURE OF OWNER / AUTHORISED SIGNATORY OF FARM**

I, \_\_\_\_\_ (full name)  
 (1) will:

- i) Notify the PSV promptly of any disease outbreaks on the farm,
- ii) Not administer production enhancers / growth stimulants or any substance that is a Beta agonist or has an oestrogenic, androgenic, gestagenic or thyrostatic effect to any animal in the flock or allow such agents to be administered or be fed,
- iii) Comply with the control measures imposed by the PSV if an outbreak of a controlled animal disease should occur on the farm,
- iv) Observe withdrawal periods of any therapeutic remedies used,
- v) Keep register of all treatments (min 3 months required)
- vi) Submit all crocodiles that die to a veterinarian for post-mortem examination except where obvious reasons for death can be given.
- vii) Inform the PSV of all undiagnosed deaths of crocodiles on the farm.
- viii) Allow the PSV to inspect any animals and take any sample(s) in the flock(s)/ in the herd(s) as he/she deems necessary,
- ix) Keep records as prescribed in paragraphs 8-11. Electronic records will be printed regularly,
- x) Will comply with the requirements set in the Standards applicable to crocodile farms approved to supply slaughter stock to export establishments.
- xi) Notify the PSV of any potential / actual chemical risks, that may arise.

(2) Declare that all the records and information provided in this application as well as in the Management programs pertaining to the farming activities on the above farm is true and accurate and that no relevant information was withheld.

Signed at \_\_\_\_\_ (date)  
 (place) \_\_\_\_\_

Signature	Owner	Authorised signatory	Witness

Attach to this application form:

- Layout plan of farm (See point 5, Annex A)

## ANNEX B



### VETERINARY INSPECTION REPORT

#### INSPECTION REPORT FOR REGISTRATION OF A CROCODILE FARM FOR EXPORT STATUS

Date of visit: \_\_\_\_\_  
 Name and position of inspector: \_\_\_\_\_  
 Farm name: \_\_\_\_\_  
 Owner: \_\_\_\_\_  
 Registration number: \_\_\_\_\_  
 Farm co-ordinates: \_\_\_\_\_

- |     |   |            |                          |           |                          |
|-----|---|------------|--------------------------|-----------|--------------------------|
| 1.  | A sketch plan of the farm (alternatively aerial photographs), indicating structures and activities is available.  | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
|     |   |            |                          |           |                          |
| 2.  | Biosecurity adequate<br>The farm/camps/pens are surrounded by a fence, and has restricted access.   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 3.  | The farm has facilities for the easy and humane handling of crocodiles, and farming practices complies with requirements set in the Livestock Welfare Coordinating Committee (LWCC's) Codes of conduct. | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 4.  | The following Registers/records are available and is actively and accurately managed:   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
|     |   |            | <input type="checkbox"/> |           | <input type="checkbox"/> |
| 4.1 | Monthly Livestock Report:   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 4.2 | Post Mortem Records:  | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 4.3 | Drug Stock Records:   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 4.4 | Drug Therapy Records:   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 4.5 | Official Inspection Reports:<br>[Corrective actions applied / not applied to aspects of non-compliance reported on previous inspection(s)]  | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 5.  | Activities that may constitute a chemical risk  |            |                          |           |                          |
| 5.1 | Intensive farming practices (e.g. feedlots):  | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 5.2 | Produce own feed / mix:   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |
| 5.3 | Buy feed / licks / feed additives commercially:   | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> | <input type="checkbox"/> |

Name of product(s) used: \_\_\_\_\_

Name of source(s): \_\_\_\_\_

5.4 Detergents or antiseptics routinely used **Yes**  **No**

Name of product(s) used: \_\_\_\_\_

5.6 Pesticides routinely used on farm: **Yes**  **No**

Name of product(s) used: \_\_\_\_\_

5.7 Insecticides used on crops / forage: **Yes**  **No**

Name of product(s) used: \_\_\_\_\_

5.8 Are crops used for grazing / forage or silage? **Yes**  **No**

5.9 Has any new industrial or mining activities been initiated on or near the farm since registration? **Yes**  **No**

5.10 Has any soil water contamination occurred since registration? **Yes**  **No**

6. General comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, Dr. \_\_\_\_\_, (*Name*)

In my capacity as Provincial State Veterinarian, hereby declare that the above farm was inspected on ..... (date) and found to comply with requirements set in the relevant standards for the registration of a farm to supply crocodile to export establishments.

Signed at \_\_\_\_\_ (date) \_\_\_\_\_  
(place)

Stamp \_\_\_\_\_  
(signature of Provincial State Veterinarian)

\_\_\_\_\_  
(Name in capital letters, title, qualifications)

\_\_\_\_\_  
Telephone number:

**ANNEX C**

**REGISTRATION CERTIFICATE FOR CROCODILE FARMS WITH EXPORT STATUS**

**Provincial Logo**

**Registration Certificate to provide crocodiles for export meat**

**It is hereby declared that the farm**

\_\_\_\_\_

**belonging to**

\_\_\_\_\_

**with**

**Registration Number:** \_\_\_\_\_

**Complies with requirements set out in the Standard for the Registration of Crocodile Farms for Export.**

**This registration certificate is valid from \_\_\_\_\_ to \_\_\_\_\_ (1 year)**

.....  
**Signature**

.....  
**Date**







## ANNEX E

<b>ATTESTATION OF ORIGIN FOR TRANSPORTING CROCODILES</b>
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(Certificate of Origin)



### HEALTH ATTESTATION FOR ANIMALS TRANSPORTED FROM A REGISTERED EXPORT FARM TO AN ABATTOIR OR REGISTERED EXPORT FARM

Department of Agriculture:  
Directorate: Veterinary Services

Ref. N° \_\_\_\_\_

#### I. IDENTIFICATION OF CROCODILE

N°	ID numbers	N°	ID numbers	N°	ID numbers	N°	ID numbers	N°	ID numbers
	A		B		C		D		E
1.		31.		61.		91.		121.	
2.		32.		62.		92.		122.	
3.		33.		63.		93.		123.	
4.		34.		64.		94.		124.	
5.		35.		65.		95.		125.	
6.		36.		66.		96.		126.	
7.		37.		67.		97.		127.	
8.		38.		68.		98.		128.	
9.		39.		69.		99.		129.	
10.		40.		70.		100.		130.	
11.		41.		71.		101.		131.	
12.		42.		72.		102.		132.	
13.		43.		73.		103.		133.	
14.		44.		74.		104.		134.	
15.		45.		75.		105.		135.	
16.		46.		76.		106.		136.	
17.		47.		77.		107.		137.	
18.		48.		78.		108.		138.	
19.		49.		79.		109.		139.	
20.		50.		80.		110.		140.	
21.		51.		81.		111.		141.	
22.		52.		82.		112.		142.	
23.		53.		83.		113.		143.	
24.		54.		84.		114.		144.	
25.		55.		85.		115.		145.	
26.		56.		86.		116.		146.	
27.		57.		87.		117.		147.	
28.		58.		88.		118.		148.	
29.		59.		89.		119.		149.	
30.		60.		90.		120.		150.	

**II. ORIGIN OF CROCODILES**

Name of owner: \_\_\_\_\_

Postal address of owner: \_\_\_\_\_

Name of farm of origin: \_\_\_\_\_

Municipal District: \_\_\_\_\_

Export registration number of farm: \_\_\_\_\_

State Veterinary area where farm of origin is located: \_\_\_\_\_

Proposed destination: \_\_\_\_\_

<b>Abattoir</b>		<b>Farm</b>	
Name:	_____	Name:	_____
Address:	_____	District:	_____
Tel N°:	_____	State Vet Area:	_____
Official Vet:	_____	Contact Person:	_____
Tel N°:	_____	Tel N°:	_____

**III. DECLARATION\***

I \_\_\_\_\_ hereby certify that the  
 Information provided above is true and accurate and that no relevant information was withheld.

Signed at (place) \_\_\_\_\_ (date) \_\_\_\_\_ \*

\_\_\_\_\_  
 (Signature owner / authorised signatory)

\*\* To be completed by the Official State Veterinarian at the abattoir or the PSV in whose district the registered export farm is situated.

**IV. ATTESTATION BY THE RECEIVING AUTHORISED PERSON\*\***

I, the undersigned authorised Official State Veterinarian hereby certify that the

number of crocodiles \_\_\_\_\_  
described above (2) arrived at \_\_\_\_\_ on \_\_\_\_\_  
(date) (Name and number of abattoir/registered farm)

Signed at (place) \_\_\_\_\_ (date) \_\_\_\_\_

Stamp \_\_\_\_\_  
(signature of Provincial State veterinarian)  
\_\_\_\_\_  
(name in capital letters, title and qualification of signatory)

Done at (place) \_\_\_\_\_ (date) \_\_\_\_\_\*

Stamp \_\_\_\_\_  
(Signature of Provincial State Veterinarian)  
\_\_\_\_\_  
(Name in capital letters, title and qualification of signatory)

\*\* To be completed by the Official State Veterinarian at the abattoir or the PSV in whose district the registered export farm is situated.

## ANNEX F

<b>HEALTH ATTESTATION</b>
<b>ISSUING PROVINCIAL STATE VETERINARIAN</b>

Ref. N° \_\_\_\_\_  
(Farm Registration N° may be used)

**Provincial  
Logo**

**Letterhead of issuing  
PSV**

**Addressed To:** \_\_\_\_\_

\_\_\_\_\_  
**(Name of PSV of district where farm of destination is located)**

\_\_\_\_\_  
**Or (Name of OSV at abattoir of destination)**

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Tel. N°:** \_\_\_\_\_  
**Fax N°:** \_\_\_\_\_

### ATTESTATION BY THE ISSUING PROVINCIAL STATE VETERINARIAN\*

I \_\_\_\_\_ hereby certify that the crocodiles as identified in the copy of the Certificate of Origin attached satisfy to the following requirements:

1. Have, without interruption, been held on the farm \_\_\_\_\_ in the district \_\_\_\_\_, with registration number \_\_\_\_\_ for at least three months before being slaughtered or since birth in the case of animals less than three months old;
2. The farm from which the animals originate:
  - 2.1 has been registered for export approval Reg N° \_\_\_\_\_
  - 2.2 receives regular veterinary inspections;
  - 2.3 was not under animal health restrictions in connection with any disease to which the animals concerned are susceptible;

Signed at (place) \_\_\_\_\_ (date) \_\_\_\_\_ \*

(Signature of Provincial State Veterinarian)

Stamp

(Name in capital letters, title and qualification)

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\* This health attestation is valid for 10 days.



## ANNEX H

<b>MONTHLY LIVESTOCK REPORT FOR ALL CROCODILES ON FARM</b>
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FARM REGISTRATION NO: .....

MONTH .....

FARM NAME: .....

YEAR .....

OWNER'S NAME: .....

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
<b>BEGINNING TOTAL</b>												
<b><u>PLUS</u> :</b> <b>CALVES BORN</b>												
<b><u>PLUS</u> :</b> <b>BOUGHT IN(1)</b>												
<b><u>MINUS</u> :</b> <b>MORTALITIES(2)</b>												
<b><u>MINUS</u> :</b> <b>SOLD(3)</b>												
<b><u>MINUS</u> :</b> <b>SLAUGHTERED(4)</b>												
<b>END TOTAL</b>												

(1) Give details of previous owner/farm and official movement permit.

(2) On farm slaughter, local slaughter and export slaughter included





**ANNEX J: (Page 1/2)**

<b>DRUG STOCK RECORD</b>
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FARM REGISTRATION NO: .....

MONTH .....

FARM NAME: .....

YEAR .....

OWNER'S NAME: .....

	PRODUCT NAME	EXPIRY DATE	WITHDRAWAL PERIOD	STOCK VOLUME	VETERINARY VERIFICATION	
					DATE	SIGNATURE
<b>ANTIBIOTICS</b>						

**ANNEX J: (Page 2/2)**

**DRUG STOCK RECORD**

FARM REGISTRATION NO: .....

MONTH .....

FARM NAME: .....

YEAR .....

OWNER'S NAME: .....

	PRODUCT NAME	EXPIRY DATE	WITHDRAWAL PERIOD	STOCK VOLUME	VETERINARY VERIFICATION	
					DATE	SIGNATURE
OTHER e.g. immobilizing drugs, LA tranquillisers						

**ANNEX K: (Page 1/2)**

<b>DRUG APPLICATION RECORD</b>
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FARM REGISTRATION NO: .....

MONTH .....

FARM NAME: .....

YEAR .....

OWNER'S NAME: .....

	PRODUCT NAME	EXPIRY DATE	WITHDRAWAL PERIOD	STOCK VOLUME	VETERINARY VERIFICATION	
					DATE	SIGNATURE
<b>ANTIBIOTICS</b>						

**ANNEX K: (Page 2/2)**

<b>DRUG APPLICATION RECORD</b>
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FARM REGISTRATION NO: .....

MONTH .....

FARM NAME: .....

YEAR .....

OWNER'S NAME: .....

	PRODUCT NAME	EXPIRY DATE	WITHDRAWAL PERIOD	STOCK VOLUME	VETERINARY VERIFICATION	
					DATE	SIGNATURE
OTHER e.g. immobilizing drugs, LA tranquillisers						