



Republic of Namibia

MINISTRY OF AGRICULTURE, WATER AND LAND REFORM

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DIRECTOR OF VETERINARY SERVICES  
Private Bag 12022  
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NAMIBIA

Permit no.

Ref. No. V13/2/2/1/ 28

Date of issue:

Expiry Date

**VETERINARY IMPORT PERMIT FOR FRESH/FROZEN PORK FROM PORTUGAL FOR COMMERCIAL PURPOSES**  
(Issued in terms of the Animal Health Act No 1/2011)

Authority is hereby granted to:

Name:

Address:

Telephone:

to import into Namibia the following,

| Description of product | Number of packages/units | Quantity in kg |
|------------------------|--------------------------|----------------|
|                        |                          |                |

Originating from ..... Name and number of establishment .....  
(Name of country)

through ..... (border post) to .....  
(Physical address at final destination in Namibia)

Subject to the following conditions:

1. **The importer accepts the sole responsibility of ensuring that the conditions below have been complied with, and understands his/her duty in this regard.**
2. The consignment must be accompanied by this **ORIGINAL** permit and with the veterinary certificate (overleaf) duly completed and signed by an official veterinarian authorised thereto by the General Directorate of Food and Veterinary. Alternatively, attestation may be done on an **ORIGINAL** veterinary export health certificate as agreed and approved by the Directorate of Veterinary Services of Namibia and General Directorate of Food and Veterinary (DGAV) of Portugal. An original export health certificate should be on official letterhead of Portugal, should be completed in English as well as the official language of the exporting country.
3. The health certificate should contain all the information on the Namibian health certificate and must be attached to the original Namibian import permit.
4. The meat must be transported from the exporting establishment to its destination in Namibia in **SEALED** refrigerated containers which will ensure that a product temperature of minus 18°C (-18 C) for frozen meat and plus 7° C (+7° C) for chilled meat is not exceeded at any time.
5. The **IMPORTER** must inform the State Veterinarian, ..... Telephone: .....of the estimated date of arrival of the consignment and arrival of the consignment at destination must be reported to the State Veterinarian immediately. **The seals may not be broken or the goods off-loaded without his/ her permission.**
6. **The State veterinarian at destination** must be informed of the dispatch of the consignment.
7. This permit is valid for one consignment only.

**CHIEF VETERINARY OFFICER**

Note:

- (1) Fresh meat means all parts fit for human consumption from domestic animals of porcine species,, frozen or chilled.
- 2.This permit does not give exemption from any prohibition or restriction imposed by any other existing legislation upon the importation of fresh meat into the Republic of Namibia.

**VETERINARY HEALTH CERTIFICATE FOR THE IMPORTATION OF FRESH/FROZEN PORK FROM PORTUGAL TO NAMIBIA.**

**Namibian Permit Number** .....

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

**Issuing Authority:** .....

**Country of Origin:**.....

**A. Description**

**1. Amount and description of product**

| Description of product | Nature of packaging | Number of carcasses/cartons/containers | Weight in kg |
|------------------------|---------------------|--|--------------|
|                        |                     |  |              |
|                        |                     |  |              |
|                        |                     |  |              |
|                        |                     |  |              |

**2. ORIGIN OF MEAT**

2.1. Abattoir Stamp

2.2 Cutting plant Stamp

**2.3 Name and address of consignor.** .....

Telephone Number ..... Email address .....

**Name of approved export abattoir(s)/cutting plant or cold store**.....

**Establishment Number:** .....

**Address** .....

**3.0 Destination of meat**

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

Telephone Number ..... Email address .....

**3.2 Physical address at destination**

Street address .....

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

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

**B: VETERINARY HEALTH AND MEAT INSPECTION CERTIFICATE**

I,.....a **veterinarian** authorised thereto by the Veterinary Authority of **Portugal** hereby certify that in respect of the meat described in **Section A OF NAMIBIAN PERMIT NUMBER:**.....

1. The country has been free from Foot and mouth disease, Vesicular Stomatitis, African Swine Fever and Swine Vesicular Disease for the previous six months.
2. With regards to PRRS the pigs where raw pork was derived were;
  - 2.1 Isolated/quarantined for a minimum number of 37 days at the farm/establishment (approved for export) where they were reared.
  - 2.2 Subjected to blocking Elisa test using blood samples collected between day 10 and 15 during their quarantine period.
  - 2.3 Slaughtered in block/s (per session/day) to avoid any possible cross contamination with animal from others sources
3. The meat was derived from animals which:
  - 3.1 were born, raised and slaughtered in the exporting country
  - 3.2 were not vaccinated with Hog Cholera vaccine within two months of slaughter;
  - 3.3 originate from an area where no case of Hog Cholera and Enterovirus encephalomyelitis of swine (Teschen disease occurred within a radius of 50 km of any of the farms of origin during the previous six (6) months;
  - 3.4 were slaughtered, and the meat handled/cut/processed and packed, at the establishment(s) mentioned overleaf being establishment(s) approved by the Director of Veterinary Services of Namibia and; in which no animals not complying with the Namibian import requirements are slaughtered.
  - 3.5 were not slaughtered in any disease eradication campaign;
  - 3.6 were subjected to both official ante-and post-mortem veterinary inspection which included examination of feet and tongues, found to be free from signs of disease and that such carcasses of meat are sound and wholesome and unconditionally passed fit for human consumption
  - 3.7 directly following post mortem inspection the meat was chilled to a deep temperature not exceeding plus 7°C (+7°C)
4. the meat was handled and transported hygienically at all times; and those precautions were taken to prevent contamination from carcasses not meeting the conditions as stated, during slaughter, packing and loading.
5. the carcasses from which the pork originates: \* - originate from an area free from trichinellosis **OR** \* - were examined and found free from trichinae, **OR** \* - the pork has been subjected to a temperature not exceeding minus 25°C (-25°C) for a continuous period of not less than 30 days. **(Delete where not applicable)**
6. All carcasses/parts/wrapping/packaging bear the official stamp(s) of the abattoir/cutting/packing plant(s) at which the animals were slaughtered and the meat handled. The marks on the meat are only made with safe, edible ink approved by the Director of Public Health and the slaughter date must be clearly marked on all packaging.  
Slaughter date .....
7. Pre-shipment samples of meat in the form of anatomically unrecognisable cuts (not less than one sample per 1000 kg. of meat; a maximum of five samples may be pooled for testing purposes) did not exceed the following microbiological limits:
 

|                             |                           |  |                           |
|-----------------------------|---------------------------|--|---------------------------|
| <b>Standard plate count</b> | <b>1x10<sup>6</sup>/g</b> | <b>Staphylococcus aureus</b>           | <b>1x10<sup>4</sup>/g</b> |
| <b>Coliforms</b>            | <b>1x10<sup>4</sup>/g</b> | <b>Salmonellae typhi / enteritidis</b> | <b>zero</b>               |
| <b>E. coli</b>              | <b>2x10<sup>3</sup>/g</b> | <b>Salmonellae (other than above)</b>  | <b>1x10<sup>2</sup>/g</b> |
8. The meat was not subjected to ionizing irradiation;
9. For frozen meat, the product temperature was minus 18°C (-18 °C) or colder at the time of loading.
10. The meat was containerized and sealed under official veterinary supervision on.  
Container/vehicle number..... Seal Number/s .....
11. Done at ..... on .....

**Address**.....

**Full Name in Print:** .....

**Signature** .....

**AUTHORISED VETERINARIAN**

**Official stamp**