

1 Plant health movement document as referred to in Article 1 (3)(c) of Commission Directive 2004/103/EC

As referred to in Regeling invoer, uitvoer en verkeer planten (Sicr. 1993, 980, art. 12 lid 5 and 6 and in Plantenziektenwet Stb. 1951,96).



Ministry of Economic Affairs

2

PLANT HEALTH MOVEMENT DOCUMENT

No. EC / NL /

3 Identification of consignment (*) — This consignment contains produce of phytosanitary relevance —

Plant, plant product or other object (TARIC code):

Reference number(s) of required phytosanitary documentation:

Reference number(s) of required customs documentation:

Country of issue, Date of issue, Distinguishing mark(s), numbers, number of packages, amount (weights/units):

(*) Fill in box or make reference to information on Phytosanitary certificate which must be attached.

4 Official registration number of importer:

I, the undersigned importer, hereby request the responsible official body to carry out the official identity checks and plant health checks of the abovementioned plants, plant products or other objects at the approved place of inspection listed below and I undertake to respect the rules and procedures set by the responsible official body.

Date, name and signature of importer:

5.2 Countersigning by NPPO/Customs

Date:

Name:

Service stamp:

5.1 Point of entry:

Signature

6 Approved place(s) of inspection

A- Number:

Name:

Address:

Place:

Country:

B- Number:

Name:

Address:

Place:

Country:

The plants, plant products or other objects are moved to the abovementioned place(s) of inspection in accordance with the agreement concluded between:

Ref.no:

Between Member State 1:

and Member State 2:

The consignment may not be moved to places other than those listed above unless this has been officially approved.

Caution! There are conditions made on the movement of the consignment to the abovementioned place(s); see for more details: www.nvwa.nl

7 Documentary check

8 Identity check

9 Plant health check

Place/date:

Name:

Service stamp:

Signature

Place/date:

Name:

Service stamp:

Signature

Place/date:

Name:

Service stamp:

Signature

10 Decision:

Release: indicate EC Plant Passport number when appropriate:

Quarantine period

Refusal of Entry**

** fill in product, quantity and reason of refusal of entry:

Place/date:

Name:

*In order of The Secretary of State
for Economic Affairs,
Authorized NPPO Inspector*

Service stamp:

Signature

Official measure on the refused products mentioned above:

Release: indicate EC Plant Passport number when appropriate:

Movement outside the Community Destruction

Removal of infected/infested produce Appropriate treatment

Remark

Place/date:

Name:

*In order of The Secretary of State
for Economic Affairs,
Authorized NPPO Inspector*

Service stamp:

Signature

NPPO art. no. 2299

Original

This form accompanies the consignment to the approved place of inspection

juni 2013
model 99 set

With regard to this decision the party concerned can submit a conclusive appeal with the Ministry of Economic Affairs. In case an appeal will be submitted this has to be entered within six weeks after the date of the decision with: Ministerie van Economische Zaken, Dienst Regelingen, Afdeling Recht en Rechtsbescherming, Postbus 20401, 2500 EK Den Haag.

1 Plant health movement document as referred to in Article 1 (3)(c) of Commission Directive 2004/103/EC

As referred to in Regeling invoer, uitvoer en verkeer planten (Sicr. 1993, 980, art. 12 lid 5 and 6 and in Plantenziektenwet Stb. 1951,96).



Ministry of Economic Affairs

2

PLANT HEALTH MOVEMENT DOCUMENT

No. EC / NL /

3 Identification of consignment (*) — This consignment contains produce of phytosanitary relevance —

Plant, plant product or other object (TARIC code):

Reference number(s) of required phytosanitary documentation:

Reference number(s) of required customs documentation:

Country of issue, Date of issue, Distinguishing mark(s), numbers, number of packages, amount (weights/units):

(*) Fill in box or make reference to information on Phytosanitary certificate which must be attached.

4 Official registration number of importer:

I, the undersigned importer, hereby request the responsible official body to carry out the official identity checks and plant health checks of the abovementioned plants, plant products or other objects at the approved place of inspection listed below and I undertake to respect the rules and procedures set by the responsible official body.

Date, name and signature of importer:

5.2 Countersigning by NPPO/Customs

Date:

Name:

Service stamp:

5.1 Point of entry:

Signature

6 Approved place(s) of inspection

A- Number:

Name:

Address:

Place:

Country:

B- Number:

Name:

Address:

Place:

Country:

The plants, plant products or other objects are moved to the abovementioned place(s) of inspection in accordance with the agreement concluded between:

Ref.no:

Between Member State 1:

and Member State 2:

The consignment may not be moved to places other than those listed above unless this has been officially approved.

Caution! There are conditions made on the movement of the consignment to the abovementioned place(s); see for more details: www.nvwa.nl

7 Documentary check

Place/date:

Name:

Service stamp:

Signature

8 Identity check

Place/date:

Name:

Service stamp:

Signature

9 Plant health check

Place/date:

Name:

Service stamp:

Signature

10 Decision:

Release: indicate EC Plant Passport number when appropriate:

Quarantine period

Refusal of Entry**

** fill in product, quantity and reason of refusal of entry:

Place/date:

Name:

*In order of The Secretary of State
for Economic Affairs,
Authorized NPPO Inspector*

Service stamp:

Signature

Official measure on the refused products mentioned above:

Release: indicate EC Plant Passport number when appropriate:

Movement outside the Community Destruction

Removal of infected/infested produce Appropriate treatment

Remark

Place/date:

Name:

*In order of The Secretary of State
for Economic Affairs,
Authorized NPPO Inspector*

Service stamp:

Signature

NPPO art. no. 2299

Duplicate

This copy accompanies the consignment to the approved place of inspection and will be taken by a NPPO inspector

juni 2013
model 99 set

With regard to this decision the party concerned can submit a conclusive appeal with the Ministry of Economic Affairs. In case an appeal will be submitted this has to be entered within six weeks after the date of the decision with: Ministerie van Economische Zaken, Dienst Regelingen, Afdeling Recht en Rechtsbescherming, Postbus 20401, 2500 EK Den Haag.

1 Plant health movement document as referred to in Article 1 (3)(c) of Commission Directive 2004/103/EC

As referred to in Regeling invoer, uitvoer en verkeer planten (Sicr. 1993, 980, art. 12 lid 5 and 6 and in Plantenziektenwet Stb. 1951,96).



Ministry of Economic Affairs

2

PLANT HEALTH MOVEMENT DOCUMENT

No. EC / NL /

3 Identification of consignment (*) — This consignment contains produce of phytosanitary relevance —

Plant, plant product or other object (TARIC code):

Reference number(s) of required phytosanitary documentation:

Reference number(s) of required customs documentation:

Country of issue, Date of issue, Distinguishing mark(s), numbers, number of packages, amount (weights/units):

(*) Fill in box or make reference to information on Phytosanitary certificate which must be attached.

4 Official registration number of importer:

I, the undersigned importer, hereby request the responsible official body to carry out the official identity checks and plant health checks of the abovementioned plants, plant products or other objects at the approved place of inspection listed below and I undertake to respect the rules and procedures set by the responsible official body.

Date, name and signature of importer:

5.2 Countersigning by NPPO/Customs

Date:

Name:

Service stamp:

5.1 Point of entry:

Signature

6 Approved place(s) of inspection

A- Number:

Name:

Address:

Place:

Country:

B- Number:

Name:

Address:

Place:

Country:

The plants, plant products or other objects are moved to the abovementioned place(s) of inspection in accordance with the agreement concluded between:

Ref.no:

Between Member State 1:

and Member State 2:

The consignment may not be moved to places other than those listed above unless this has been officially approved.

Caution! There are conditions made on the movement of the consignment to the abovementioned place(s); see for more details: www.nvwa.nl

7 Documentary check

Place/date:

Name:

Service stamp:

Signature

8 Identity check

Place/date:

Name:

Service stamp:

Signature

9 Plant health check

Place/date:

Name:

Service stamp:

Signature

10 Decision:

Release: indicate EC Plant Passport number when appropriate:

Quarantine period

Refusal of Entry**

** fill in product, quantity and reason of refusal of entry:

Place/date:

Name:

*In order of The Secretary of State
for Economic Affairs,
Authorized NPPO Inspector*

Service stamp:

Signature

Official measure on the refused products mentioned above:

Release: indicate EC Plant Passport number when appropriate:

Movement outside the Community Destruction

Removal of infected/infested produce Appropriate treatment

Remark

Place/date:

Name:

*In order of The Secretary of State
for Economic Affairs,
Authorized NPPO Inspector*

Service stamp:

Signature

1 Fytosanitair vervoersdocument als bedoeld in artikel 1, lid 3, onder c), van Richtlijn 2004/103/EG van de Commissie, als bedoeld in de Regeling invoer, uitvoer en verkeer planten (Stcrt 1993, 980, art. 12 lid 5 en 6 en in de Plantenziektenwet Stb. 1951,96))
Phytosanitaires Transportdokument gemäß Artikel 1 Absat 3 Buchstabe c) der Richtlinie 2004/103/EG der Kommission
Document phytosanitaire de transport visé à l'article 1^{er}, paragraphe 3, point c), de la directive 2004/103/CE de la Commission

**2 FYTOSANITAIR VERVOERSDOCUMENT
PHYTOSANITÄRES TRANSPORT-DOKUMENT
DOCUMENT PHYTOSANITAIRE DE TRANSPORT**

3 Identificatie van de zending*:

Plant, plantaardig product of andere materialen (Taric-code):
Referentienummer(s) van de vereiste fytosanitaire documentatie:
Referentienummer(s) van de vereiste douanedocumentatie:
Land van afgifte:
Datum van afgifte:
Merktteken(s), aantallen, aantal verpakkingen, hoeveelheid (gewicht/stuks):
** Vul vak in of verwijst naar informatie op het fytosanitair certificaat dat moet worden bijgevoegd.*

Angaben zur Identifizierung der Sendung*:

Pflanze, Pflanzenerzeugnis oder anderer Gegenstand (Taric-code):
Bezugsnummer(n) der vorgeschriebenen Pflanzengesundheitsdocumente:
Bezugsnummer(n) der vorgeschriebenen Zolldokumente:
Ausstellungsland:
Ausstellungsdatum:
Besondere(s) Kennzeichen, Anzahl, Zahl der Packstücke, Menge (Gewicht/Einheiten):
** Feld ankreuzen oder Bezug auf Angaben in der Beifolgenden Pflanzengesundheitsbescheinigung.*

Identification du lot*:

Végétaux, produits végétaux ou autres objets (code Taric):
Numéro(s) de référence des documents phytosanitaires requis:
Numéro(s) de référence des documents de douane requis:
Pays d'émission:
Date d'émission:
Marque(s) distinctive(s), nombre, nombre de colis, quantité (poids/unités):
** Remplir la rubrique ou renvoyer aux informations fournies dans le certificat phytosanitaire, qui doit être joint.*

4 Officieel registratienummer van de importeur:

Ondertekende, importeur, verzoek bij dezen de verantwoordelijke officiële controles van de indentiteit en fytosanitaire controles van bovengenoemde planten, plantaardige producten of andere materialen op onderstaande goedgekeurde plaats van inspectie uit te voeren, en belooft de door de verantwoordelijke officiële instantie vastgestelde regels en procedures in acht te nemen.

Amtliche Zulassungsnummer des Einführers:

Der unterzeichnete Einführer beantragt hiermit bei der zuständigen amtlichen Stelle, die amtlich vorgeschriebenen Nämlichkeitskontrollen und Gesundheitsuntersuchungen der vorgenannten Pflanzen, Pflanzenerzeugnisse oder andere Gegenstände an dem nachstehend ausgeführten genehmigten Kontrollort durchzuführen, und verpflichtet sich, die von der zuständigen amtlichen Stelle festgelegten Regeln und Verfahrensvorschriften einzuhalten.

Numéro d'enregistrement officiel de l'importateur:

Je soussigné, importateur, demande que l'organisme officiel responsable effectue les contrôles d'identité et les contrôles phytosanitaires officiels des végétaux, produits végétaux ou autres objets précités dans le lieu d'inspection agréé indiqué ci-dessous et je m'engage à respecter les règles et procédures fixées par cet organisme.

Datum, naam en handtekening van de importeur:

Datum, Name und Unterschrift des Einführers:

Date, nom et signature de l'importateur:

5.1 Plaats van binnenkomst:

**Eingangsort:
Point d'entrée:**

5.2 Ondertekening door de NPPO/Douane van de plaats van binnenkomst (datum, naam, dienststempel en handtekening):

Gegenzeichnung durch die amtliche Stelle am Eingangsort (Datum, Name, Amtssiegel und Unterschrift):
Contresigné de l'organisme officiel du point d'entrée (date, nom, cachet et signature du service):

6 Goedgekeurde plaats(en) van inspectie:

A- Nummer:
Naam:
Adres:
Plaats:
Land:

B- Nummer:
Naam:
Adres:
Plaats:
Land:

De planten, plantaardige producten of de andere materialen worden naar bovengenoemde plaats(en) gebracht in overeenstemming met de overeenkomst tussen Ref.nr. tussen lidstaat 1 en lidstaat 2:
De zending mag niet naar andere plaatsen worden gebracht, tenzij dit officieel is goedgekeurd.

Zugelassene Kontrollstelle(n):

A- Nummer:
Name:
Adresse:
Ort:
Land:

B- Nummer:
Name:
Adresse:
Ort:
Land:

Die Pflanzen, Pflanzenerzeugnisse oder anderen Gegenstände werden zu dem (den) vorgenannten Kontrollort(en) befördert nach Vereinbarung zwischen Ref.nr. zwischen Mitgliedstaaten 1 und Mitgliedstaaten 2
Die Sendung darf nicht an andere als die vorgenannten Orte befördert werden, es sei denn, es liegt eine amtliche Genehmigung vor.

Lieu(x) d'inspection agréé(s):

A- Numéro
Nom
Adresse
Lieu
Pays

B- Numéro
Nom
Adresse
Lieu
Pays

Les végétaux, produits végétaux et autres objets sont transportés vers le(s) lieu(x) d'inspection susmentionné(s) conformément à l'accord conclu entre. Le lot ne peut être transporté vers des lieux autres que ceux susmentionnés, sauf autorisation officielle.

Er zijn voorwaarden gesteld aan het vervoer van een zending naar de bovengenoemde plaats(en); zie voor meer details www.minlnv.nl/pd

7 Controle van de documenten

Plaats/datum:
Naam:
Dienststempel/handtekening:

Dokumentenprüfung
Ort/Datum:
Name:
Amtssiegel/Unterschrift:

Contrôle documentaire
Lieu/Date:
Nom:
Cachet/signature du service:

8 Controle van de identiteit

Plaats/datum:
Naam:
Dienststempel/handtekening:

Nämlichkeitskontrolle
Ort/Datum:
Name:
Amtssiegel/Unterschrift:

Contrôle d'identité
Lieu/Date:
Nom:
Cachet/signature du service:

9 Fytosanitaire controle

Plaats/datum:
Naam:
Dienststempel/handtekening:

Pflanzengesundheitsuntersuchung
Ort/Datum:
Name:
Amtssiegel/Unterschrift:

Contrôle phytosanitaire
Lieu/Date:
Nom:
Cachet/signature du service:

10 Beslissing:

Vrijgegeven: in voorkomend geval, nummer EG-plantenpaspoort (volnummer, weeknummer of serie nummer)

Quarantaine periode

Binnenkomst geweigerd *

** Vul in produkt, hoeveelheid en reden van weigering binnenkomst.*

Officiële maatregel van de geweigerde bovengenoemde producten.

Vrijgegeven: in voorkomend geval, nummer EG-plantenpaspoort (volnummer, weeknummer of serie nummer)

Vervoer buiten de gemeenschap

Verwijdering van besmette/aangetaste producten

Vernietiging

Adequate Behandeling

Opmerkingen

Amtliche Maßnahme:

Einfuhrverweigerung

Beförderung asserhalb der Gemeinschaft

Entfernung infizierter/befallener erzeugnisse

Anmerkung:

Entscheidung:

Freigegeben

Vernichtung
Quarantänezeitraum
Zweckgerechte Behandlung

Ort/Datum:

Name:

Amtssiegel/Unterschrift:

Ggf. Nummer dez EU-Pflanzenpasses (Serien-, wochen- oder Chargennummer) angeben:

Décision:

Rejet

Lieu/Date:

Nom:

Cachet/signature du service:

Indiquer le numéro du passeport phytosanitaire européen (numéro de série ou numéro de semaine ou numéro individuel de lot), le cas échéant:

Mesures officielles

Entrée refusée

Transport en dehors de la Communauté

Elimination des produits infestés/infectés

Remarques:

Destruction
Période de quarantaine
Traitement approprié

Een belanghebbende kan tegen dit besluit een met redenen omkleed bezwaarschrift indienen bij de Minister van Economische Zaken.

Als een bezwaarschrift wordt ingediend, moet dit binnen 6 weken na dagtekening van dit besluit worden verzonden naar: het Ministerie van Economische Zaken,

t.a.v. de Afdeling Rechtsbescherming, Postbus 2041, 2500 EK Den Haag.

Origineel: Dit formulier begeleidt de zending naar de erkende inspectielocatie

Duplicaat: Dit exemplaar begeleidt de zending naar de erkende inspectielocatie en wordt ingenomen door de NPPO inspecteur.

Triplicaat: Dit exemplaar wordt door een NPPO of Douane inspecteur ingenomen na de documentcheck.