

COMMON ENTRY DOCUMENT

EUROPEAN COMMUNITY

Common Entry Document, CED

Part I: Details of dispatched consignment	I.1 Consignor		I.2 CED reference number	
	Name		DPE	
	Address		DPE Unit N ^o .	
	Country	+ISO code		
	I.3 Consignee		I.4 Person responsible for the consignment	
	Name		Name	
	Address		Address	
	Postal code		I.5 Country of origin	I.6 Country from where consigned
	Country	+ISO code	+ISO code	+ISO code
	I.7 Importer		I.8 Place of destination	
	Name		Name	
	Address		Address	
	Postal code		Postal code	
	Country	+ISO code	Country	+ISO code
	I.9 Arrival at DPE (estimated date)		I.10 Documents	
Date		Number		
I.11 Means of transport		Data of issue		
Airplane <input type="checkbox"/> Ship <input type="checkbox"/> Railway wagon <input type="checkbox"/> Road vehicle <input type="checkbox"/>				
Identification:				
Documentary references				
I.12 Description of commodity		I.13 Commodity code (HS code)		
		I.14 Gross weight/Net weight		
		I.15 Number of packages		
I.16. Temperature		I.17 Type of packages		
Ambient <input type="checkbox"/>	Chilled <input type="checkbox"/>			
	Frozen <input type="checkbox"/>			
I.18. Commodity intended for				
Human consumption <input type="checkbox"/> Further process <input type="checkbox"/> Feeding stuff <input type="checkbox"/>				
I.19 Seal number and container number				
I.20 For transfer to <input type="checkbox"/>		I.21		
Control Point Control Point Unit N ^o		/		
I.22. For import <input type="checkbox"/>				
I.24 Means of transport to Control Point				
Railway wagon <input type="checkbox"/> Registered N ^o				
Airplane <input type="checkbox"/> Flight N ^o				
Ship <input type="checkbox"/> Name				
Road vehicle <input type="checkbox"/> Plate N ^o				
I.25. Declaration		Place and data of declaration		
I, the undersigned person responsible for the consignment detailed above, certify that to the best of my knowledge and belief the statements made in Part I of this document are true and complete and I agree to comply with the legal requirements of Regulation (EC) N ^o 882/2004, including payment for official controls, and consequent official measures in case of non compliance with the feed and food law.		Name of signatory		
		Signature		

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Part II: Decision on consignment	II.1. CED Reference Number	II.2. Customs Document Reference
	II.3. Documentary Check Satisfactory <input type="checkbox"/> Not satisfactory <input type="checkbox"/>	II.4. Consignment selected for physical checks Yes <input type="checkbox"/> No <input type="checkbox"/>
	II.5. ACCEPTABLE for transfer <input type="checkbox"/> Control Point _____ Control Point Unit N° _____	
	II.6. NOT ACCEPTABLE <input type="checkbox"/> 1. Re-dispatching <input type="checkbox"/> 2. Destruction <input type="checkbox"/> 3. Transformation <input type="checkbox"/> 4. Use for other purpose <input type="checkbox"/>	II.7. Details of Controlled Destinations (II.6) Approval no (where relevant) _____ Address _____ Postal code _____
	II.8. Full identification of DPE and official stamp DPE _____ Stamp _____ DPE Unit N° _____	II.9. Official Inspector I the undersigned official inspector of the DPE, certify that the checks on the consignment have been carried out in accordance with Community requirements.
	II.10.	II.11. Identity check Yes <input type="checkbox"/> No <input type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory <input type="checkbox"/>
	II.12. Physical Check Satisfactory <input type="checkbox"/> Not Satisfactory <input type="checkbox"/>	II.13. Laboratory Tests Yes <input type="checkbox"/> No <input type="checkbox"/> Tested for _____ Results: Satisfactory <input type="checkbox"/> Not Satisfactory <input type="checkbox"/>
	II.14. ACCEPTABLE for release for free circulation Human consumption <input type="checkbox"/> Further process <input type="checkbox"/> Feedingstuff <input type="checkbox"/> Other <input type="checkbox"/>	II.15.
	II.16. NOT ACCEPTABLE 1. Re-dispatching <input type="checkbox"/> 2. Destruction <input type="checkbox"/> 3. Transformation <input type="checkbox"/> 4. Use for other purpose <input type="checkbox"/>	II.17. Reason for Refusal 1. Absence/Invalid certificate (if applicable) <input type="checkbox"/> 2. ID: Mis-match with documents <input type="checkbox"/> 3. Physical hygiene failure <input type="checkbox"/> 4. Chemical contamination <input type="checkbox"/> 5. Microbiological contamination <input type="checkbox"/> 6. Other <input type="checkbox"/>
	II.18. Details of Controlled Destinations (II.16) Approval no (where relevant) _____ Address _____ Postal code _____	
II.19. Consignment resealed New seal no _____		
II.20. Full identification of DPE/Control Point and official stamp Stamp _____	II.21. Official Inspector I the undersigned official inspector of the DPE/Control Point, certify that the checks on the consignment have been carried out in accordance with Community requirements. Name (in capital) _____ Date _____ Signature _____	

Part III: Decision on consignment	III.1. Details on re-dispatching: Means of transport n° _____ Railway wagon <input type="checkbox"/> Aeroplane <input type="checkbox"/> Ship <input type="checkbox"/> Road vehicle <input type="checkbox"/> Country of Destination: _____ + ISO code _____ Date _____
	III.2. Follow up Arrival of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/> Correspondence of the consignment Yes <input type="checkbox"/> No <input type="checkbox"/> Local Competent Authority Unit <input type="checkbox"/>
	III.3. Official Inspector Name (in capital) _____ Address _____ Date _____ Stamp _____ Unit N° _____ Signature _____