Section 1: Additional sheet: PLANNING To be completed in BLOCK letters BEFORE the journey by the ORGANISER responsible for the whole journey							
6.1 Name of place, includin each rest, transfer and exit	g postcode, of	6.2 A Date	rrival Time		rture Time	6.3 Length (hours)	6.4 Transporter's name and Authorisation reference (if different to that at 1.)
							In amoretic to that at 17
7. I, the organiser, hereby declare that I am responsible for the organisation of the abovementioned journey and I have made suitable arrangements to safeguard the welfare of the animals throughout the journey in accordance with the provisions of Council Regulation (EC) No 1/2005. I have confirmed that the transporters named in this log each hold an over 8 hour long journey Transporter Authorisations.					Animal Health office stamp (Office use only)		
8. Organiser's signature:							
Date	Organiser's Journey Log Reference				Health Certificate(s) references		

Please submit this form to: Welfare in Transport, Specialist Service Centre - Exports, Hadrian House, Wavell Drive, Rosehill Industrial Estate, Carlisle CA1 2TB