

HARYANA GOVERNMENT**ANIMAL HUSBANDRY AND DAIRYING DEPARTMENT****Notification**

The 30th September, 2016

No. 1925-AH-2016/11249.— In exercise of the powers conferred by section 43 of the Prevention and Control of Infectious and Contagious Diseases in Animals Act, 2009 (Central Act 27 of 2009), the Governor of Haryana with the prior approval of the Central Government hereby makes the following rules, namely:-

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| Short title and commencement | <p>1. (1) These rules may be called the Haryana Prevention and Control of Infectious and Contagious Diseases in Animals (Check Post and Quarantine Camp, Manner of Inspection etc.) Rules, 2016.</p> <p>(2) They shall come in force from the date of their publication in the official Gazette.</p> |
| Definitions | <p>2. (1) In these rules, unless the context otherwise requires, -</p> <p>(a) “Act” means the “Prevention and Control of Infectious and Contagious Diseases in Animals Act, 2009 (Act 27 of 2009);</p> <p>(b) “form” means form appended to these rules;</p> <p>(c) “officer in-charge” means Veterinary Surgeon of any Check Post or Quarantine Camp;</p> <p>(d) “section” means a section of the Act.</p> <p>(2) Words and expressions used in these rules but not defined shall have the same meaning as assigned to them in the Act.</p> |
| Manner of inspection at check post. Section 14(1) and 15(1) (2) | <p>3. An officer-in-charge of a Check Post shall inspect every animal at Check Post or at the Quarantine Camp and shall ensure that,-</p> <p>(i) all vehicles carrying animals are stopped at the Check Post;</p> <p>(ii) only animal having proper eartaging/marking, proper health certificate and a vaccination certificate is allowed to pass after being satisfied that the animal is clinically healthy;</p> <p>(iii) animal who is not being tagged, without vaccination certificate or health certificate, is detained ;</p> <p>(iv) all detained animals are examined thoroughly by the Veterinary Surgeon before shifting to the Quarantine Camp;</p> <p>(v) all the sheds, feed stores at Quarantine Camps are thoroughly cleaned and disinfected.</p> |
| Manner of inspection of Quarantine Camp. Section 14 | <p>4. An officer incharge of the Quarantine Camp shall ensure that,-</p> <p>(i) in case an animal is suffering from any scheduled disease and is being carried without authenticated certificate of health and vaccination, such an animal is retained in the quarantine camp for a minimum period of fourteen days and acknowledgement to this effect shall be issued to the owner of the animal in Form A;</p> <p>(ii) in case a disease is diagnosed in an animal, such an animal shall be retained for such period, as specified by the Government matching the incubation period after the entry of biological pathogen into the body;</p> <p>(iii) after identification, animal is ear tagged/tattooed, if not earlier tagged;</p> <p>(iv) physical examination of the animal is done for ecto-parasites and other diseases;</p> <p>(v) health record of animals for the period of detention is being maintained;</p> <p>(vi) collection of the necessary samples and arrangement for testing in the specified laboratory are made;</p> <p>(vii) hematological/urine/fecal examination as and when required is carried out, appropriate follow up action, has been taken;</p> |

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| <ul style="list-style-type: none"> (viii) in the event of mortality during detention, post mortem is conducted and the carcass is disposed off as per rules; (ix) employees working in the quarantine are well uniformed, as specified by the department; (x) expenditure incurred on feed, fodder and vaccination is borne by the owner of the animal; (xi) the animals, having completed the quartintine duration prescribed under this rule, are released after being vaccinated against the infectious diseased. | |
| <p>5. The officer in-charge shall, at the time of release of an animal from the station, shall grant a permit in Form B for animals other than poultry and in Form C for poultry.</p> | Form of permit section 14(4) |
| <p>6. If any question arises in implementation of these rules, the matter shall be refered to the Director General, Animal Husbandry and Dairying Department, whose decision thereon shall be final and binding.</p> | Interpretation |

RAJNI SEKHRI SIBAL,
Additional Chief Secretary to Government Haryana,
Animal Husbandry & Dairying Department.

FORM A*[See rule 4(i)]***QUARANTINE CAMP CUSTODY ACKNOWLEDGEMENT**

Certificate No.

All the animals described below have been taken in my custody on this day..... for a period of 14 days.

| | | | |
|---|----------------|----------|----------|
| Details of Quarantine Camp | | | |
| Location | | | |
| Animal owner details | | | |
| Name and address of animal owner | | | |
| Animals arrived from | | | |
| Animals destined for | | | |
| | Animal details | | |
| | Animal 1 | Animal 2 | Animal 3 |
| Identification number | | | |
| Species | | | |
| Breed | | | |
| Age | | | |
| Colour | | | |
| Quarantine camp Custody Acknowledgement issue details | | | |
| Date of issue: | | | |
| Place of issue: | | | |

Signature

(Name and designation)
 Registration number with state
 Veterinary Council/Veterinary Council of India
 Official Seal

Form B*[See rule 5]*

PERMIT FOR ANIMALS OTHER THAN POULTRY ISSUED BY VETERINARY SURGEON

A. General information (origin of Animal (s))

State from where Animals are coming -

Place from where Animals are coming –

B. Identification of Animal (s)

Number

Mark

Species

Sex

Age

C. Quarantine details

Name and address of consignee

Manner of transport

Type of container

D. Sanitary information

The undersigned certifies that the Animal (s) described above examined on this ----- day by me -

(a) Shows/show no clinical signs of disease mentioned in schedule of Infectious and Contagious Diseases Act.

(b) Satisfies/satisfy the following requirements:-

1. Animal was born on -----.

2. Place where from animal has come is free from scheduled diseases.

3. The Animal has come from an establishment which is regularly inspected by Veterinary Authority.

4. The Animals were subjected to hematological diagnostic test for ----- and urine/fecal examination ----- with negative results.

Place:

Date:

Signature

(Name and designation)

Registration number with state

Veterinary Council/Veterinary Council of India

Official Seal

Form C*[See rule 5]***PERMIT FOR POULTRY (BIRDS) ISSUED BY VETERINARY SURGEON****A. General information (origin of birds/poultry)**

State from where birds are coming -

Place from where birds are coming -

B. Identification of bird (s)

Number

Mark

Species

Sex

Age

C. Quarantine detail

Name and address of consignee

Manner of transport

Type of container

D. Sanitary information

The undersigned certifies that the birds described above examined on this day by me -

- (a) Shows/show no clinical signs of disease mentioned in schedule of Infectious and Contagious Diseases Act.
- (b) Satisfies/satisfy the following requirements:-
 - 1. Birds coming from an establishment, which is/are free from scheduled diseases.
 - 2. Birds came from an establishment or a hatchery which is regularly inspected by Veterinary authority.
 - 3. Birds were subjected to hematological diagnostic test for -----with negative results.

Place:

Date:

Signature
(Name and designation)

Registration number with state
Veterinary Council/Veterinary Council of India
Official Seal.

RAJNI SEKHRI SIBAL,
Additional Chief Secretary to Government of Haryana,
Animal Husbandry and Dairying Department.