APPLICATION ONLY NOT TO BE CERTIFIED



DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS

SCOTTISH EXECUTIVE ENVIRONMENT AND RURAL AFFAIRS DEPARTMENT NATIONAL ASSEMBLY FOR WALES								
7 🔷						No:		
HEALT EXPOR CERTI	H CERTI TING CO FYING INARIAN	FICATE UNTRY : UN : OF	EAT BRITAIN ITED KINGDO FICIAL VETE of the anim.	M (GREAT BRITAIN RINARIAN	I)			
	dentific ttoo/mic numbe	crochip	Name,	breed and physic description	al	Sex	Date of birth	
II.	Origin	n of the a	nimal					
	(a)		address of	exporter:	٥,			
	(b)	Address	of premises	of origin:	7			
III		Destinati	on of anima	11				
	(a)	Name and	address of	importer:				
	(b)	Premises	of destina	tion:				
	(c)	Import pe	ermit no. (if applicable):				J1 .
	(d)	Means of	transportat					
				(flight number	r, vessel na	ame, vehi	cle reg. Number	r) -

6544EHC (09/02/2006)

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IV. Health Information

I, the undersigned, hereby certify that the animal described overleaf meets the following requirements:

- (a) on (date), being not more than 72 hours prior to the proposed date of export, the said animal was examined and found to be free from clinical signs of infectious or contagious disease and external parasites and in my opinion, is fit to travel;
 - the said dog was fully vaccinated against rabies, distemper, leptospirosis and parvovirus in accordance with the manufacturer's instructions and the dates of the vaccination are as follows:

Name of disease	Date of vaccination
rabies	
distemper:	
leptospirosis:	
parvovirus:	

v.	This certificate is valid for 10 days from the date of signature. If animal is transported by sea, the period of validity is extended by the	the
	animal is transported by sea, the period of validity is extended by the	he
	duration of the voyage.	

duration of the voyage.	
OFFICIAL VETERINARIAN Stamp	SignedRCVS
	Name in block
	letters:
Date	Address