APPLICATION ONLY NOT TO BE CERTIFIED



DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS
THE SCOTTISH EXECUTIVE ENVIRONMENT AND RURAL AFFAIRS DEPARTMENT
NATIONAL ASSEMBLY FOR WALES

♦				No	o:
HEALT	TH CER		ITED KINGDOM (G	REAT BRITAIN)	
FOR C		FION BY: OF the tification of the	FICIAL VETERINAI	RIAN	
Ide dis	entific and a stingu:	cation ny Lshing luding	3reed	Sex	Age
			('	7	
II.	Orig	in of the animal	Y		
	a) b)		ss of exporter.		
	c)		ss of importer:		C.
	d)	Premises of de	stination:		

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III. Health Information

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

- (a) on ,(date), being not more than 14 days 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, in my opinion, is fit to travel;
- (b) on ,(date), the said dog, during the past 12 months was vaccinated against distemper, hepatitis, leptospirosis, parvovirus, parainfluenza and rabies, as detailed below using licensed products;

Disease	Name of	Batch	Expiry	Date of
\sim	product	number	Date	vaccination
distemper				
hepatitis				
leptospirosis				
parvovirus				
parainfluenza				
rabies				

	is valid for 14 days from the date of signature and the journey to the place of destination.
stamp	Signed
	Official Veterinarian
Date:	Address