

APPLICATION ONLY NOT TO BE CERTIFIED



DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS
SCOTTISH GOVERNMENT
WELSH GOVERNMENT

DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND RURAL AFFAIRS NORTHERN IRELAND

No:

EXPORT OF DOGS AND CATS FROM THE UNITED KINGDOM TO GRAND CAYMAN AND THE CAYMAN ISLANDS

HEALTH CERTIFICATE

EXPORTING COUNTRY: UNITED KINGDOM

CERTIFYING VETERINARIAN: OFFICIAL VETERINARIAN

I. Number and Identification of the animal

Microchip Number, Location and Implant Date	Name of Animal	Sex and status (neutered or intact)	Age or Date of Birth	Species	Breed	Colour and Markings

II. Origin of the animal

a) Name and address of exporter:

b) Address of premises of origin:

c) Name and address of Importer:

d) Premises of destination:

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III. Health Information

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

a) On _____ (date), being not more than 14 days prior to the proposed date of export, the animal described at paragraph I. above was examined and found to be free from clinical signs of infectious or contagious disease and external parasites and was in my opinion fit to travel;

b) On _____ (date) the animal was vaccinated against **rabies** using an inactivated or recombinant rabies vaccine in accordance with the recommendations of the vaccine manufacturer and in accordance with the World Small Animal Veterinary Association vaccination guidelines for dogs and cats:

Name of vaccine:

Vaccine manufacturer:

Batch Number and expiry date:

Period of vaccine validity **1*/2*/3*** years

c) On _____ (date), being not less than 30 days after the **rabies vaccination** and being not more than 12 months prior to export, a blood sample was taken from the animal and was sent to a laboratory approved by the Cayman Islands Department of Agriculture and subjected to a Fluorescent Antibody Virus **Neutralising Test** showing a serum antibody level of at least 0.5 IU/ml (the laboratory report is attached to this certificate);

d) OTHER ROUTINE VACCINATIONS {including mandatory DHP(dogs, FVRCP(cats))}

Name of vaccine, manufacturer and batch number	Date of vaccination

e) On _____ (date), being not more than 14 days prior to the proposed date of export, the animal was treated against **ticks** with a systemic acaricidal preparation known to have residual action against ticks used according to the manufacturer's instructions:

Name of product:

Dose rate:

Active ingredient: _____ ;

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- f) On (date), being not more than 14 days prior to the proposed date of export, the animal was treated against **tapeworm** with praziquantel at a dose rate of 5mg/kg bodyweight or in the case of a heavy dog, at a dose rate not exceeding the manufacturer's recommendations:

Name of product:

Dose rate:

Active ingredient: ;

- g) The animal's microchip was scanned to verify correct identity at the time of physical examination and prior to the administration of the tick and tapeworm treatments detailed in paragraphs (e) and (f) above.

- h) After due enquiry, I am satisfied that the following statements apply with respect to the animal described in paragraph I. (delete statements which are not applicable):

- i. The animal has been resident in the country of export since birth, or continuously for the past three (3) months
- ii. The animal has been in one or more 'no' rabies-risk countries for the past three (3) months
- iii. The animal has been in one or more 'low' rabies-risk countries for the past three (3) months
- iv. The animal has been in one or more 'high' rabies-risk countries for the past three (3) months
- v. The animal was originally from the Cayman Islands
- vi. The animal is travelling by sea to the Cayman Islands
- vii. Country of origin of animal(s) {if different from country of export}: Insert name of country of origin:

- i) After due enquiry, I am satisfied that the animal has not been present within the past three (3) months in an officially quarantined or designated rabies area.

- j)* **ONLY IN THE CASE OF A DOG**

After due enquiry, having examined the dog, and following receipt of the written declaration from the owner/exporter, I am satisfied that the dog is not one of the following breeds (including crosses of these breeds):

- i. Pit Bull terrier and its breed types;
- ii. Dogo Argentino and its breed types;
- iii. Fila Brasileiro and its breed types;
- iv. Japanese Tosa and its breed types; and
- v. Any breed of dog or crossbreed of dog whose breeding lineage was for the primary purpose of dog fighting

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k) I have received a written declaration from the owner/exporter stating that the animal will be placed in a container of no lesser standard than that required in the International Air Transport Association (IATA) Live Animals Regulation Container Requirement 1, with all documentation affixed to the container; and I have received a written declaration from the owner/exporter stating that:

EITHER

i. *The animal will be transported to the Cayman Islands by a direct route

OR

ii. *It will be travelling through a territory not on the approved list, and that the door of the container will be sealed under official supervision before loading of the animal for export and the number of the seal entered onto the health certificate by an airline or government official (e.g. agriculture, customs).

* Delete as appropriate

IV. This certificate is valid for 14 days.

Date:.....
Stamp

SignedMRCVS

Name in block letters:

.....
(Official Veterinarian)

Address
.....
.....