

REFERENCE NUMBER: _____

VETERINARY HEALTH CERTIFICATE

Export of a commercial dog of 8 months or less to Canada

Consignee
Name and Address

Consignor
Name and Address

Import permit number: _____

I. Animal identification

# Microchip	Birth Date (YYYY-MM-DD)	Sex	Breed	Color

II. Vaccination

The animal or animals have been vaccinated against rabies. Puppies MUST NOT have been vaccinated against rabies BEFORE the age of three months.

# Micropuce	Vaccination Date (YYYY-MM-DD)	Vaccine Name and Manufacturer	Lot Number	Due Date (YYYY-MM-DDJ)

The animal or animals have been vaccinated against distemper, hepatitis, parvovirus and parainfluenza virus no earlier than six weeks of age using vaccines approved by the central veterinary authority of the country of origin.

# Micropuce	Vaccination Date (YYYY-MM-DD)	Vaccine Name and Manufacturer	Lot Number	Due Date (YYYY-MM-DDJ)

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III. Veterinary examination, (no more than 48 hours before entry into Canada)

The dog or dogs presented for import and those of the kennel of origin are healthy and free of any clinical sign of contagious or infectious disease and, as far as can be determined, were not exposed to such diseases.

The animal or animals are fit to be transported without undue suffering by reason of infirmity, illness, injury, fatigue or other cause during the expected journey.

At the time of examination for sanitary certification, the puppy or puppies were at least 8 week of age.

Date of examination (YYYY-MM-DD): _____

Time of examination : _____

Puppy's age : _____

IV. Kennel of origin certification

Name of the kennel of origin : _____

No case of distemper, hepatitis, parvovirus and parainfluenza virus has occurred in the last ninety (90) days preceding the date of shipment of the animal or animals.

V. Transport

The transport of the animal or animals (when transported by air) will be in accordance with the International Air Transport Association (IATA), approved by the Office international des Épizooties (OIE).

I certify that after due enquiry all the information provided in this Veterinary Health Certificate is true and the animal(s) fully comply with the pre-export requirements described in the CFIA (Canadian Food Inspection Agency) Import Permit

Name and address of the veterinarian:

Signature : _____

Date : _____

(YYYY-MM-DD)