

Veterinary health certificate for the export of cats from Greece to Australia

To be endorsed by the Official Government Veterinarian

1. Animal details

| | |
|---|--|
| Import permit number: | |
| Name of animal: | |
| Date of birth: (dd/mm/yyyy) | |
| Sex: (mark with an X in the appropriate box) | <input type="checkbox"/> Male <input type="checkbox"/> Neutered male <input type="checkbox"/> Female <input type="checkbox"/> Neutered female <input type="checkbox"/> If female, she is not more than 30 days pregnant or suckling young. |
| Microchip number: | |
| Site of microchip: | |
| Date of final examination and microchip scanning (within five days of export) (dd/mm/yyyy) | |
| Contact details of preparing Government Approved Veterinarian | Name: _____ Email/Contact Details: _____ |

2. Test / treatment record

| Tests conducted | Sample collection date (dd/mm/yyyy) | Test type | Test result |
|---|---|---|-------------|
| Rabies Neutralising Antibody Titre Test (RNATT) | 1. Collection date 2. Date arrived at laboratory | FAVN* or RFFIT* (Positive at $\geq 0.5\text{IU/mL}$) *[Strike through as required] | |

| Vaccinations administered | Vaccination date(s) (dd/mm/yyyy) | Vaccination type |
|----------------------------------|---|-------------------------|
| Rabies vaccination | | Vaccine name: |
| | | Batch number: |
| | | Expiry date: |
| | | Date next booster due: |

| Treatments administered | Treatment date(s) (dd/mm/yyyy) | Treatment type |
|--|---|--|
| External parasites <i>*[Strike through as required]</i> | 1. | Product name: Active ingredient(s): Dose rate: |
| | *2. | Product name: Active ingredient(s): Dose rate: |
| | *3. | Product name: Active ingredient(s): Dose rate: |
| Internal parasites | 1. | Product name: Active ingredient(s): Dose rate: |
| | 2. | Product name: Active ingredient(s): Dose rate: |

3. Declarations

1. Either:

*The cat was exported from Australia on ____/____/____ (dd/mm/yyyy) and a copy of the Australian export permit is attached.

OR

*The cat underwent an identity verification on ____/____/____ (dd/mm/yyyy) which is at least 180 days prior to the scheduled date of export to Australia and a copy of the identification declaration is attached.

OR

*The cat was not exported from Australia and has not undergone an identity verification.
[*Strike through as required]

2. The cat was free from signs of clinical or infectious disease during the final inspection within 5 days of export.

3. The cat's rabies vaccination is current according to manufacturer directions in the country of export at the scheduled date of export to Australia.

4. The cat is fit and healthy to undertake the journey to Australia and undergo quarantine.

4. Endorsement

I certify that after due enquiry all the information provided in this veterinary health certificate is true and the cat fully complies with the pre-export requirements described in the Australian import permit and the microchip number listed on all documentation matches the microchip number scanned on the animal described here.

| | |
|--|---|
| <hr/> <i>Signature of Official Government Veterinarian</i> <i>Stamp of Official Government Veterinarian</i> | Country of export: GREECE |
| | Competent Authority: |
| | Date certificate completed: (day/month/year) |
| | Name: |
| | Address: |
| | Phone number: |
| | Email contact: |