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No dog, cat, nonhuman primate, or additional kinds or classes of animals designated by USDA regulation shall be delivered to any intermediate handler or carrier for transportation in commerce, unless accompanied by a health certificate executed and issued by a licensed veterinarian (7 USC 21.43.9 CFR, Subchapter A, Part 2).

OMB APPROVED
0579-0036
Exp. XX/XXXX

U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE UNITED STATES INTERSTATE AND INTERNATIONAL CERTIFICATE OF HEALTH EXAMINATION FOR SMALL ANIMALS	WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document, or uses such document knowing it to be false, fictitious or fraudulent may be subject to a fine of not more than \$10,000 Or imprisonment of not more than 5 years or both (18 U.S.C 1001).	1. TYPE OF ANIMAL SHIPPED <input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Other <input type="checkbox"/> Nonhuman Primate	CERTIFICATION NUMBER
		2. TOTAL NUMBER OF ANIMALS	PAGE

3. NAME, ADDRESS AND TELEPHONE NUMBER OF OWNER/CONSIGNOR USDA License or Registration Number If Applicable _____ Telephone _____	4. NAME, ADDRESS AND TELEPHONE NUMBER OF CONSIGNEE USDA License or Registration Number If Applicable _____ Telephone _____
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5. ANIMAL IDENTIFICATION (To be completed by owner/consignor)					6. VACCINATION HISTORY (To be completed by Veterinarian)						attach original signature Rabies certificate here
COMPLETE USDA TAG COLLAR AND/OR TATTOO NUMBER	BREED – COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS	RABIES <input type="checkbox"/> Killed Virus <input type="checkbox"/> Live Virus		D-H-L		OTHER VACCINATIONS TESTS OR TREATMENT		
					Date	Product	Date	Product	Date	Type/Result	
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											

"X" Applicable Statement					Veterinary certification: I certify that the animals described in item 5 have been examined by me this date, that the information provided in item 6 is true and accurate to the best of my knowledge, and that the following findings have been made "X" applicable statements.					
<input type="checkbox"/> Owner/consignor certification: I certify that the information concerning the animals described above in item 5 is true and that I am the owner/consignor of such described animals and that I have physical and legal custody of such animal(s).					<input type="checkbox"/> I certify that the animals described and continuation sheet(s) if applicable, have been inspected by me this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge exposure thereto, which would endanger					
<input type="checkbox"/> I hereby certify that the animal(s) in this shipment is (are), to the best of my knowledge acclimated to air temperatures lower than 7.2°C (45°F).					<input type="checkbox"/> I certify that the animals described above, and on continuation sheet(s) if applicable have been inspected by me this date and appear to be free of physical abnormalities which would endanger the animal.					
SIGNATURE				DATE	<input type="checkbox"/> To my knowledge the animals described above and on continuation sheet(s) If applicable originated from an area not quarantined for rabies and have not been exposed to rabies.					

ENDORSEMENT FOR INTERNATIONAL EXPORT (WARNING: International shipments require Certification by an accredited veterinarian. States may also require such certification). <i>Apply USDA Seal or Stamp here</i>					NAME, ADDRESS AND TELEPHONE NUMBER				LICENSE NUMBER		
SIGNATURE OF USDA VETERINAIAN					DATE	TELEPHONE				Accredited <input type="checkbox"/> Yes <input type="checkbox"/> No	
									LICENSING STATE		
									DATE		