

Cat exported from Canada (Category 3) to Australia

Veterinary Health Certificate (Attachment A)

Parts 1-3 to be completed by Licensed Veterinarian

1. Animal details

| | |
|---|--|
| Import Permit number: | |
| Name of animal: | |
| Date of birth: | |
| 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 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 5 days of export): | |

2. Test / treatment record

| Tests conducted | Sample collection date | Test type | Test result |
|---|------------------------|--|-------------|
| Rabies Neutralising Antibody Titre Test (RNATT) | | FAVN* or RFFIT* (Positive at ≥ 0.5 IU/mL) [*Strike through as required] | |

| Treatments administered | Treatment date(s) | Treatment details (list date of last vaccinated, product name, active ingredient and date booster due) |
|---|-------------------|---|
| Rabies vaccination | | |
| External parasites [*Strike through as required] | 1. | |
| | *2. | |
| | *3. | |
| Internal parasites | 1. | |
| | 2. | |

3. Signature of Licensed Veterinarian

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.

| | |
|---|---|
| <i>Signature of Licensed Veterinarian</i> | Country of export: |
| | License number: |
| | Date certificate completed: <i>(day/month/year)</i> |
| | Name: |
| | Address: |
| | Phone number: |

4. Endorsement by CFIA Veterinarian

I certify that the Veterinarian that issued the Veterinary Health Certificate is licensed by their respective Provincial Licensing Organizations and the export preparations meet the export requirements described in the Australian Import Permit.

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