

EXPORT CERTIFICATE FOR INTERNATIONAL MOVEMENT OF CATS, DOGS & FERRETS



EGYPT

Consignor or Owner:

Last Name First Name Initial Phone Number
Address City State ZIP

Consignee or Purchaser:

Last Name First Name Initial Phone Number
Address : City, State, ZIP, Egypt

Animal Description

Species: Canine ☐ Feline ☐ Avian ☐ Other _____

Pets Name: _____

Microchip, Tattoo, or Other ID Breed Color Sex Years / Months _____/____

License Number (if any) Identifying Marking _____

Rabies Vaccine Used:

(Important) Manufacturer Lot # Tag # Vaccination Date

I hereby certify that I have examined the above animal and found same to be free from apparent clinical signs of contagious or infectious disease(s). The above-mentioned animal is not being transported from a rabies quarantine area and, to the best of my knowledge, has not bitten anyone within the past ten (10) days.

I further certify that I am licensed and accredited by the State of _____ and the U.S. Department of Agriculture for the issuance of this certificate. I further certify that to the best of my knowledge this certificate is issued in compliance with the requirements of the state or country of destination.

Name of Clinic/Hospital License # Clinic / Hospital Address

-Veterinarian Print Name _____

Optional Remarks:

Other Vaccinations: _____

Other Treatments: _____

Heartworm Test within Past 12 Months: Yes ☐ No ☐ Results _____

Fecal Examination within Past 12 Months: Yes ☐ NO ☐ Results _____

Communicable External Parasitism / Dermatopathy: _____

Debilitating Condition (if any): _____

Veterinarian Signature Date

Veterinarian's Stamp (if available)

ATTACH INOCULATION RECORD

