

**VETERINARSKO ZDRAVSTVENO SPRIČEVALO ZA MAČKE /**  
**VETERINARY HEALTH CERTIFICATE FOR CATS**

Št. / No:.....

Država izvora: / Exporting country: .....

Ministrstvo: / Ministry: .....

Pristojni organ: / Service: .....

**I. ŠTEVILO IN IDENTIFIKACIJA ŽIVALI / NUMBER AND IDENTIFICATION OF ANIMALS**

Ime / Name	Pasma / Breed	Datum skotitve / Date of birth	Barva / Colour	Teža / Weight	Spol / Sex
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Identifikacijski dokument št. /  
Passport No.

Št. mikročipa /  
No. of transponder

**II. IZVOR ŽIVALI / ORIGIN OF THE ANIMALS**

a) Ime in naslov izvoznika: / Name and address of Exporter: .....

b) Naslov kraja izvora: / Address of premises of origin: .....

c) Ime in naslov uvoznika/namembnega kraja: / Name and address of Importer/premises of destination: .....

d) Uvozno dovoljenje št. (če se zahteva): / Import permit No. (if applicable): .....

**III. PODATKI O ZDRAVSTVENEM STANJU / HEALTH INFORMATION**

Podpisani uradni veterinar s tem potrjujem: / I, the undersigned official veterinarian, hereby certify that:

- a) da je bila dne ....., ne več kot 48 ur pred predlaganim dnevom izvoza, opisana žival pregledana in ni kazala nobenih kliničnih znakov infekcijskih ali nalezljivih bolezni, niti za notranje ali zunanje zajedavce in je po mojem mnenju sposobna potovati; / on ....., being not more than 48 hours prior to the proposed date of export, the said animal was examined and found to be in good state of health and free of clinical signs of any infectious or contagious disease and of internal and external parasites, and, in my opinion, is fit to travel;

- b) da je za obdobje šest mesecev ali manj, odvisno od starosti živali pred odhodom iz Slovenije, bivala mačka na področjih, kjer v zadnjih 12 mesecih ni bilo pojava stekline ter, da je bila v navedenem obdobju cepljena proti steklini; / for a period of six months or less depending on the age of pet prior to departure from Slovenia, the cat has been located in an area where no cases of rabies has been detected for the last 12 months, and has been inoculated against rabies within the same period.
- c) da je opisana žival cepljena proti virusnemu rinotraheitisu mačk in kalicivirozi mačk (mačji nahod). / the said animal was vaccinated against feline viral rhinotracheitis and feline calicivirosis (cat flu).

**IV. To spričevalo velja 10 dni od dneva podpisa. / This health certificate is valid for 10 days from date of signature.**

Datum / Date .....

Žig / Stamp

.....  
Podpis uradnega veterinarja / Signature of official veterinarian