REPUBLIKA SLOVENIJA / REPUBLIC OF SLOVENIA
MINISTRSTVO ZA KMETIJSTVO, GOZDARSTVO IN PREHRANO /
MINISTRY OF AGRICULTURE, FORESTRY AND FOOD
Uprava Republike Slovenije za varno hrano, veterinarstvo in varstvo rastlin /
The Administration of the Republic of Slovenia for Food Safety,
Veterinary Sector and Plant Protection

VETERINARSKO SPRIČEVALO ZA UVOZ PSOV IN MAČK V SINGAPUR / VETERINARY CERTIFICATE FOR THE IMPORT OF DOGS AND CATS INTO SINGAPORE

Za države/regije iz seznama II: Avstrija, Belgija, Bermudi, Kanada, Kajmani otoki, Ciper, Češka, Danska, Estonija, Finska, Francija, Nemčija, Grčija, Hongkong SAR, Islandija, Italija, Japonska, Jersey, Latvija, Lihtenštajn, Luksemburg, Malta, Nova Kaledonija, Norveška, Portugalska, Slovaška, Slovenija, Španija (razen Ceuta in Melilla), Švedska, Švica, Nizozemska, Združene države Amerike / For Schedule II countries/regions: Austria, Belgium, Bermuda, Canada, Cayman Islands, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hong Kong SAR, Iceland, Italy, Japan, Jersey, Latvia, Liechtenstein, Luxembourg, Malta, New Caledonia, Norway, Portugal, Slovakia, Slovenia, Spain (exept Ceuta and Melilla), Sweden, Switzerland, the Netherlands, USA

VS-40/12/1-Singapur

Št. uvoznega dovoljenja NParks/AVS / NParks/AVS Import Licence No.: _____

Veterinarsko spričevalo št. (če je ustrezno) / Veterinary Certificate No. (if applicable): _____

Opomba: Pred odpremo je treba pridobiti uvozno dovoljenje NParks/AVS za uvoz psa/mačke. / N.B. A valid NParks/AVS Import Licence to import the dog/cat must be obtained before shipment.

DEL I / SECTION I — IDENTIFIKACIJA PSA/MAČKE / IDENTIFICATION OF THE DOG/CAT

Vrsta: / Species: _____

Pasma: / Breed: _____

Ime živali: / Name of animal: _____

Spol (ustrezno obkrožite): / Sex (please circle): **Samec** / Male **Kastriran samec** / Neutered Male **Samica** / Female **Sterilizirana samica** / Neutered female

Starost ali datum rojstva: / Age or Date of Birth: _____ **(žival mora biti v času izvoza stara najmanj 12 tednov)** / (animal must be at least 12 weeks of age at the time of export)

Barva: / Colour: _____

[Opomba: Naslednje pasme in njihovi križanci so prepovedani za uvoz: Pit Bull (vključno z ameriškim pit bull terierjem, znanim tudi kot ameriški pit bull in pit bull terier, ameriški staffordshirski terier, staffordshirski bulterier, ameriški buldog in križanci med njimi in drugimi pasmami), neapeljski mastif, tosa, akita, argentinska doga, boerboel, brazilska fila, kanarska doga in njihovi križanci; križanci z bengalsko mačko ali mačko pasme savannah do vključno četrte generacije.] / [N.B. The following breeds and their crosses are prohibited for import: Pit Bull (including the American Pit Bull Terrier also known as the American Pit Bull and Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier, the American Bulldog, and crosses between them and other breeds), Neopolitan Mastiff, Tosa, Akita, Dogo Argentino, Boerboel, Fila Brasileiro, Perro de Presa Canario and their crosses; Bengal and Savannah cat crosses of 4th generation and below.]

Številka mikročipa: / Microchip Number: _____

Pred izvozom, dne _____ **(dan/mesec/leto), je bil živali odčitan mikročip z zgoraj omenjeno številko, ki je zavedena tudi v njenem potrdilu o cepljenju.** / The animal has been scanned on _____ (day/month/year) prior to export and found to be implanted with a microchip bearing the above microchip number, which is also reflected on the animal's vaccination certificate.

DEL II / SECTION II — IZVOR PSA/MAČKE (navedite možnost, ki velja) / ORIGIN OF THE DOG/CAT (indicate the option that applies)

Po ustrezni poizvedbi sem prepričan, da je pes/mačka (neustrezno črtati), opredeljen v tem spričevalu, stalno prebival/a v državi/regiji izvoza:- / After due enquiry I am satisfied that the dog/cat (delete as appropriate) identified in this certificate has been continuously resident in the country/region of export:-

(a) **od rojstva, ali** / since birth, or

stalno prebival/a v državi/regiji izvoza ali v drugih državah, naštetih v kategoriji A, kategoriji B ali kategoriji C:- / continuously resident in the country/region of export or in other countries listed in Category A, Category B or Category C:-

(b) **odkar je bil/a uvožen/a neposredno iz Singapurja dne** _____ **(dan/mesec/leto), ali** / since being imported directly from Singapore on _____ (day/month/year), or

(c) **najmanj 6 mesecev pred izvozom in v času izvoza ni pod omejitvijo zaradi karantene.** / for a minimum period of 6 months prior to export, and is not under quarantine restriction at the time of export.

DEL III ZDRAVSTVENE INFORMACIJE / SECTION III SANITARY INFORMATION

Spodaj podpisani pooblaščeni/uradni veterinar (neustrezno črtati) _____ **(ime z velikimi tiskanimi črkami)** _____ **(država/regija izvoza), potrjujem, da zgoraj opisan/a pes/mačka (neustrezno črtati):** / I, _____ (Name in BLOCK LETTERS), the undersigned veterinarian, being a Government approved veterinarian / Official government veterinarian (delete as appropriate) of _____ (the country/region of export), certify in respect of the dog/cat (delete as appropriate) described above that:

Splošna cepljenja (neustrezno črtati) / General Vaccinations (strike out whichever does not apply)

Pes je bil cepljen proti pasji kugi, pasjemu adenovirusu tipa 1, pasjemu parvovirusu tipa 2 v skladu s priporočili proizvajalca cepiva in vsaj 14 dni pred izvozom. / The dog was vaccinated against Canine Distemper virus, Canine Adenovirus type 1 and Canine Parvovirus type 2 according to the vaccine manufacturer's recommendations and at least 14 days prior to export.

Datum cepljenj: / Date of vaccinations:

Pasja kuga: / Canine distemper: _____ **(dan/mesec/leto)** / (day/month/year)

Pasji adenovirus tipa 1: / Canine Adenovirus type 1: _____ **(dan/mesec/leto)** / (day/month/year)

Pasji parvovirus tipa 2: / Canine Parvovirus type 2: _____ **(dan/mesec/leto)** / (day/month/year)

Mačka je bila cepljena proti virusu mačjega kalicivirusa, mačjem herpesvirusu - 1 in virusu mačje panleukopenije v skladu s priporočili proizvajalca cepiva in vsaj 14 dni pred izvozom. / The cat was vaccinated against Feline Calicivirus, Feline Herpesvirus- 1 and Feline Panleukopenia virus according to the vaccine manufacturer's recommendations and at least 14 days prior to export.

Datum cepljenj: / Date of vaccinations:

Mačji kalicivirus: / Feline Calicivirus: _____ **(dan/mesec/leto)** / (day/month/year)

Mačji Herpesvirus - 1: / Feline Herpesvirus -1: _____ **(dan/mesec/leto)** / (day/month/year)

Virus mačje panleukopenije: / Feline Panleukopenia Virus: _____ **(dan/mesec/leto)** / (day/month/year)

Cepljenje proti steklini in serološko testiranje / Rabies Vaccinations and Serological Testing

Pes/mačka je bil/a cepljen/a proti steklini z inaktiviranim cepivom ali rekombinantnim cepivom, sprejemljivim za NParks/AVS,. Cepljenje mora biti ali veljavno primarno cepljenje ali veljavno obnovitveno cepljenje v skladu s priporočili proizvajalca cepiva. / The dog/cat was vaccinated against rabies using an inactivated vaccine or recombinant vaccine acceptable to NParks/AVS. The vaccination must be a valid primary vaccination or a valid booster vaccination in accordance with the recommendations of the vaccine manufacturer.

Datum cepljenja proti steklini: / Date of rabies vaccination: _____ **(dan/mesec/leto)** / (day/month/year)

Najmanj 28 dni po primarnem cepljenju ali zadnjem obnovitvenem cepljenju proti steklini je bil na psu/mački opravljen test titracije protiteles proti steklini z WOAH predpisanim testom, ki je pokazal, da titer nevtralizacijskih protiteles proti virusu stekline znaša vsaj 0,5IU/ml, opravljen ne manj kot 90 dni in ne več kot 12 mesecev pred izvozom.
Test titracije je treba opraviti bodisi v referenčnem laboratoriju za steklino organizacije WOAH ali v odobrenem laboratoriju v državi s seznama I ali II, ki ga je odobril pristojni organ v državi iz seznama I ali II. Veljaven izvid testiranja mora biti priložen spričevalu. / At least 28 days after the primary rabies vaccination or last rabies booster, the dog/cat is subjected to a WOAH prescribed test showing a rabies neutralising antibody titre of at least 0.5 IU/ml, not less than 90 days and not more than 12 months prior to export. The rabies serology test must be conducted at either a WOAH reference laboratory for

rabies or at a laboratory in a Schedule I or II country approved by the respective Competent Authority of the Schedule I or II country. A valid test report must accompany this certification.

Datum odvzema krvi: / Date of blood sampling: _____ (**dan/mesec/leto)** / (day/month/year)

Titer nevtralizacijskih protiteles proti virusu stekline: / Rabies neutralising antibody titre: _____ IU/ml

Odpravljanje zunanjih zajedavcev / External Parasite Treatment

Pes/mačka je bil/a 2-7 dni pred izvozom zdravljen/a s proizvodom, učinkovitim proti zunanjim zajedavcem (bolham in klopom). / The dog/cat was treated with a product effective against external parasites (fleas and ticks) between 2 and 7 days of export.

Datum zdravljenja: / Date of treatment: _____ **(dan/mesec/leto)** / (day/month/year)

Ime proizvoda: / Name of product: _____

Učinkovina: / Active ingredient: _____

Odpravljanje notranjih zajedavcev / Internal Parasite Treatment

Pes/mačka je bil/a 2-7 dni pred izvozom zdravljen/a s proizvodom, učinkovitim proti notranjim zajedavcem (glistam in trakuljam). / The dog/cat was treated with a product effective against internal parasites (nematodes and cestodes) between 2 and 7 days of export.

Datum zdravljenja: / Date of treatment: _____ **(dan/mesec/leto)** / (day/month/year)

Ime proizvoda: / Name of product: _____

Učinkovina: / Active ingredient: _____

Brejost (za samice) / Pregnancy (for females)

Po ustrezni poizvedbi sem prepričan, da žival v času izvoza ni breja. / After due enquiry I am satisfied that the animal is not pregnant at the time of export.

Prepovedane pasme / Prohibited breeds

Po ustrezni poizvedbi sem prepričan, da žival ni ena od prepovedanih pasem ali križancev, navedenih v Delu I. / After due enquiry I am satisfied that the animal is not one of the prohibited breeds or crosses as listed in Section I.

Klinični pregled / Clinical examination

Pred izvozom sem pregledal psa/mačko in ugotovil, da je zdrav/a, brez kakršnih koli kliničnih znakov kužne ali nalezljive bolezni in je sposobna za potovanje v času izvoza. / I have examined the dog/cat and found it to be healthy, free from any clinical sign of infectious or contagious disease and fit for travel at the time of export.

Potrditev / Endorsement

Del I do III lahko potrdi pooblaščeni veterinar ali uradni veterinar. / Sections I to III may be endorsed by a government-approved veterinarian or an official government veterinarian.

Podpis: / Signature: _____ **Datum:** / Date: _____ **(dan/mesec/leto)** / (day/month/year)

Ime pooblaščenega veterinarja ali uradnega veterinarja (neustrezno črtati): / Name of government-approved veterinarian or an official government veterinarian (delete as appropriate):

_____

Naslov, telefon, telefaks, elektronska pošta: / Address, telephone, fax, email of practice:

_____

_____

_____

DEL IV (mora potrditi uradni veterinar) /
SECTION IV (must be endorsed by official government veterinarian)

Spodaj podpisani uradni veterinar _____ **(ime z velikimi tiskanimi črkami)** _____ **(država/regija izvoza), potrjujem, da zgoraj opisan/a pes/mačka (neustrezno črtati):** / I, _____ (Name in BLOCK LETTERS), the undersigned veterinarian, being an Official government veterinarian of _____(the country/region of export), certify in respect of the dog/cat (delete as appropriate) described above that:

Po ustrezni poizvedbi in pregledu dokumentov pes/mačka v času izvoza ni pod omejitvami zaradi karantene. / After due enquiry and examination of documents, the dog/cat is not under quarantine restriction at the time of export.

Nimam razloga dvomiti v resničnost podatkov iz Dela I do III in sem po svojih najboljših močeh prepričan, da zgoraj certificiran pes/mačka izpolnjuje zahteve za uvoz v Singapur. / I have no reason to doubt the truthfulness of the information given in Sections I to III and am satisfied to the best of my ability that the dog/cat certified above meets with the requirements for importation into Singapore.

VELJAVNOST SPRIČEVALA: To spričevalo je veljavno sedem (7) dni. / CERTIFICATION VALIDITY: This certification is valid for seven (7) days.

Podpis: / Signature: _____ **Datum:** / Date: _____ **(dan/mesec/leto)** / (day/month/year)

Ime uradnega veterinarja: / Name of official government veterinarian:

_____

Naslov, telefon, telefaks, elektronska pošta: / Address, telephone, fax, email contact:

_____

_____

_____

Uradni žig: / Official Stamp: