

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 kategorije C: Avstrija, Belgija, Kanada, Ciper, Estonija, Finska, Francija, Italija, Latvija, Nizozemska, Republika Koreja, Slovaška, Slovenija, Španija, Tajvan, Združene države Amerike (razen Gvam in Havaji) / For Category C countries/regions: Austria, Belgium, Canada, Cyprus, Estonia, Finland, France, Italy, Latvia, Netherlands, Republic of Korea, Slovakia, Slovenia, Spain, Taiwan, United States of America (except Guam and Hawaii)

VS-40/12-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 IDENTIFIKACIJA PSA/MAČKE /
SECTION I 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 odčitán 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 IZVOR PSA/MAČKE (navedite možnost, ki velja) /
SECTION II 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 pooblaščen/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, kužnemu hepatitisu psov, pasji parvovirozi v skladu s priporočili proizvajalca cepiva in vsaj 14 dni pred izvozom. / The dog was vaccinated against Canine Distemper, Canine Infectious Hepatitis, Canine Parvovirus, 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)

Kužni hepatitis psov: / Canine infectious hepatitis: _____ (dan/mesec/leto) / (day/month/year)

Pasja parvoviroza: / Canine parvovirus: _____ (dan/mesec/leto) / (day/month/year)

Mačka je bila cepljena proti virusu mačjega kalicivirusa, virusu mačjega rinotraheitisa in virusu mačje panleukopenije v skladu s priporočili proizvajalca cepiva in vsaj 14 dni pred izvozom. / The cat was vaccinated against Feline Calicivirus, Feline Rhinotracheitis Virus 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)

Virus mačjega rinotraheitisa: / Feline Rhinotracheitis Virus: _____ (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

PROSIM NAVEDITE MOŽNOST, KI VELJA (NEUTSREZNE MOŽNOSTI PREČRTAJTE). / PLEASE INDICATE THE OPTION THAT APPLIES (STRIKE OUT OPTIONS THAT DO NOT APPLY).

Možnost 1: Kategorija C1 / Option 1: Category C1

Pes/mačka je bil/a cepljen/a proti steklini z inaktiviranim cepivom ali rekombinantnim cepivom, sprejemljivim za NParks/AVS, vsaj dvakrat, pri čemer je bilo prvo cepljenje izvedeno vsaj 4 mesece pred izvozom, drugo cepljenje pa vsaj 1 mesec po prvem cepljenju in najmanj 1 mesec pred izvozom. Prvo cepljenje mora biti veljavno v času izvedbe drugega cepljenja. / The dog/cat was vaccinated against rabies using an inactivated vaccine or recombinant vaccine acceptable to NParks/AVS on at least two occasions, with the first vaccination at least 4 months prior to export, and the second vaccination at least 1 month after the first vaccination and at least 1 month prior to export. The first vaccination must be valid at the time of administering the second vaccination.

Datum cepljenj: / Date of vaccinations:

Steklina (prvo cepljenje): / Rabies (1st vaccination): _____ (dan/mesec/leto) / (day/month/year)

Steklina (drugo cepljenje): / Rabies (2nd vaccination): _____ (dan/mesec/leto) / (day/month/year)

Vsaj 1 mesec (30 dni) po datumu prvega cepljenja in v 6 mesecih pred izvozom je bil psu/mački odvzet vzorec krvi in bil testiran z OIE-priporočenim testom¹, ki je pokazal, da titer nevtralizacijskih protiteles proti virusu steklini znaša vsaj 0,5 IU/ml. Veljavno poročilo o testiranju mora spremljati to spričevalo. / At least 1 month (30 days) following the date of the first vaccination and within 6 months prior to export, a blood sample was taken from the dog/cat and tested with an OIE-recommended

test¹ showing a rabies neutralising antibody titre equal to or greater than 0.5 IU/ml. 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

Pes/mačka, ki je uvožen/a v skladu s tem protokolom in izpolnjuje zgoraj navedeno, bo po uvozu najmanj 10 dni v karanteni. / Dog/cat imported under this protocol and fulfilling the above would be subjected to quarantine for a period of not less than 10 days upon import.

Možnost 2: Kategorija C2 / Option 2: Category C2

Pes/mačka je bil/a cepljen/a proti steklini z inaktiviranim cepivom ali rekombinantnim cepivom, sprejemljivim za NParks/AVS, vsaj 3 mesece pred izvozom. 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 at least 3 months prior to export. The vaccination must be a valid primary vaccination or a valid booster vaccination according to the vaccine manufacturer's recommendations.

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

Vsaj 1 mesec (30 dni) po datumu tega cepljenja in v 6 mesecih pred izvozom je bil psu/mački odvzet vzorec krvi in bil testiran z OIE-priporočenim testom², ki je pokazal, da titer nevtralizacijskih protiteles proti virusu steklini znaša vsaj 0,5 IU/ml. Veljavno poročilo o testiranju mora spremljati to spričevalo. / At least 1 month (30 days) following the date of this vaccination and within 6 months prior to export, a blood sample was taken from the dog/cat and tested with an OIE-recommended test² showing a rabies neutralising antibody titre equal to or greater than 0.5 IU/ml. 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

Pes/mačka, ki je uvožen/a v skladu s tem protokolom in izpolnjuje zgoraj navedeno, bo po uvozu najmanj 30 dni v karanteni. / Dog/cat imported under this protocol and fulfilling the above would be subjected to quarantine for a period of not less than 30 days upon import.

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: _____

Brežost (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.

¹ Trenutni testi za steklino, ki jih priporoča OIE, so nevtralizacijski test za določanje protiteles proti virusu stekline (FAVN) in hitri test inhibicije fluorescentnih žarišč (RFFIT). / Currently, OIE-recommended tests for international trade for rabies include the Fluorescent Antibody Virus Neutralising (FAVN) Test and the Rapid Fluorescent Focus Inhibition Test (RFFIT).

² Trenutni testi za steklino, ki jih priporoča OIE, so nevtralizacijski test za določanje protiteles proti virusu stekline (FAVN) in hitri test inhibicije fluorescentnih žarišč (RFFIT). / Currently, OIE-recommended tests for international trade for rabies include the Fluorescent Antibody Virus Neutralising (FAVN) Test and the Rapid Fluorescent Focus Inhibition Test (RFFIT).

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

V 7 dneh 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. / Within 7 days of export 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 pooblaščen 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: