

**ZDRAVSTVENO SPRIČEVALO ZA PSE IN MAČKE /
ANIMAL HEALTH CERTIFICATE FOR DOGS AND CATS**

Št. / No:.....

Država izvora: / Exporting country:

Ministrstvo: / Ministry:

Pristojni organ: / Service:

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

Identifikacija in razpoznavni znaki / Identification and Any distinguishing marks	Pasma / Breed	Barva / Colour	Teža / Weight	Spol / Sex	Starost / Age
--	---------------	----------------	---------------	------------	---------------

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 (navesti, kadar se razlikuje od naslova izvoznika) / Address of premises of origin (indicate when different from the address of Exporter):

.....
.....

c) Ime in naslov uvoznika / Name and address of Importer:

.....
.....

d) Naslov namembnega kraja (navesti, kadar se razlikuje od naslova uvoznika) / Address of place of destination (indicate when different from the address of Importer):

.....
.....

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

III. PODATKI O ZDRAVSTVENEM STANJU / HEALTH INFORMATION

Podpisani potrjujem, da: / I, the undersigned, hereby certify that:

a) je bila dne (dd/mm/llll) ne več kot 48 ur pred predlaganim dnevom izvoza opisana žival pregledana ter, da ni kazala nobenih kliničnih znakov nalezljivih ali kužnih bolezni in je po mojem mnenju sposobna potovati. / on (dd/mm/yyyy) being not more than 48 hours prior to the proposed date of export, the said animal was examined and found to be in good health and free from clinical signs of infectious or contagious disease, and, in my opinion, is fit to travel.

b) je bila navedena žival tretirana proti notranjim zajedalcem s preparatom (proizvajalec in ime izdelka) dne (dd/mm/llll) in proti zunanjam zajedalcem s preparatom (proizvajalec in ime izdelka) dne (dd/mm/llll), ne več kot 6 mesecev pred predlaganim dnevom izvoza ter je prosta zunanjih zajedalcev. / the said animal was treated against internal parasites with following product (manufacturer and name of product) on (dd/mm/yyyy) and against external parasites with following product (manufacturer and name of product) on (dd/mm/yyyy), within

6 months prior to the proposed date of export and the animal is free from ectoparasites.

c) ⁽¹⁾ (i) je bila dne (dd/mm/llll) opisana žival cepljena proti steklini z inaktivirano vakcino,
..... (trgovsko ime in serijska številka cepiva), z veljavnostjo (do tri leta), po
navodilih proizvajalca. /

on (dd/mm/yyyy) the said animal was vaccinated against rabies, using an inactivated vaccine
..... (trade name and the serial number of the vaccine), with duration of its validity
(up to three years)....., according to the manufacturer's instructions.

ali / or

⁽¹⁾ (i) je opisana žival mlajša od treh mesecev in ni cepljena proti steklini, iz predložene dokumentacije matere pa je
jasno razvidna identiteta in veljavno cepljenje proti steklini. /

the described animal is less than three months old and not vaccinated against rabies also, the additional
documentation attached clearly shows mothers identity and valid vaccination against rabies.

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

URADNI VETERINAR / OFFICIAL VETERINARIAN:

.....
Ime (z velikimi tiskanimi črkami) / Name (in capital letters)

.....
Izobrazba in naziv / Qualification and title

.....
.....
.....
Naslov / Address

.....
Datum / Date

Žig / Stamp

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

Opombe / Notes

⁽¹⁾ Neustrezno črtati. / Delete as appropriate.