

**VETERINARSKO SPRIČEVALO ZA PSE IN MAČKE /
VETERINARY HEALTH CERTIFICATE FOR DOGS AND CATS**

Št / No:

Država izvora/izvoza / Country of origin/export:

Ministrstvo / Ministry:

Pristojni organ / Issuing authority:

I. ŠTEVILO IN IDENTIFIKACIJA ŽIVALI / NUMBER AND IDENTIFICATION OF ANIMAL(S)

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

Identifikacijski dokument št. /
Passport No:

Št. mikročipa ali tetovirne številke /
No. of transponder or tattoo:

II. IZVOR ŽIVALI IN NAMEMBNI KRAJ / ORIGIN OF ANIMAL(S) AND PLACE OF DESTINATION

Ime in naslov pošiljatelja / Name and address of consignor:

Naslov kraja izvora / Address of premises of origin:

Ime in naslov prejemnika / Name and address of consignee:

Naslov namembnega kraja / Address of premises of destination:

III. PODATKI O ZDRAVSTVENEM STANJU / HEALTH ATTESTATION

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

- a) je bila dne / on ne več kot 48 ur pred predvidenim dnevom izvoza, opisana žival pregledana in ni kazala nobenih kliničnih znakov infekcijskih ali kužnih bolezni in je po mojem mnenju sposobna za predvideno potovanje; / not more than 48 hours prior to the envisaged date of export, the animal in question was examined and found in a good state of health and free from any clinical signs of infectious or contagious disease, and therefore, I find it fit for the intended journey;

Priporočljivo je, da se temperatura okolja te živali vzdržuje v okviru specifikacij iz uredbe USDA 9 CFR.3.18. / It is recommended that the ambient temperature of this animal's environment be maintained within the specifications of USDA Regulation 9 CFR.3.18.

b) Cepljenje proti steklini: / Vaccination against rabies:

⁽¹⁾ v primeru prve vakcinacije ⁽²⁾ / in the case of primary vaccination⁽²⁾:

dne / on je bila opisana žival cepljena proti steklini (najkasneje 30 dni pred vstopom v Združene države Amerike), / the said animal was vaccinated against rabies (at least 30 days before entry to the United States of America), in cepljenje velja do / and the vaccination is valid until

ali / or

⁽¹⁾ v primeru ponovne vakcinacije /in the case of booster vaccination (re-vaccination):

dne / on je bila opisana žival cepljena proti steklini pred iztekom veljavnosti predhodnega cepljenja / the said animal was revaccinated against rabies within the period of validity of previous vaccination, in cepljenje velja do / and the vaccination is valid until

c) Test titracije protiteles proti steklini / Rabies antibody titration test (FAVN)

Videl/a sem uradni izvid o rezultatu serološkega testa živali, ki je bil izveden na vzorcu, odvzetem dne (dd/mm/ll), v laboratoriju, odobrenem s strani EU, in ki navaja, da je bil titer protiteles, ki nevtralizirajo steklino, enak ali večji od 0,5 IE/ml. /

I have seen an official record of the result of a serological test for the animal, carried out on a sample taken on (dd/mm/yyy), and tested in an OIE-approved laboratory, which states that the rabies neutralizing antibody titer was equal to or greater than 0,5 IU/ml.

d) žival ne izvira iz območja, ki je pod karanteno zaradi stekline in ni bila izpostavljena steklini; / the animal does not originate from an area under quarantine for rabies and has not been exposed to rabies;

e) Zaščita pred klopi / Tick Treatment

Proizvajalec in ime izdelka / Manufacturer and name of product:

Datum in čas tretiranja (dd/mm/ll + ura) / Date and time of treatment (dd/mm/yy + 24-hour clock):

IV. Veljavnost tega spricevala je 30 dni od datuma izdaje. / Validity of this certificate is 30 days from the date of issue.

V / Done at:

Datum izdaje / Date of issue:

Žig / Stamp

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

⁽¹⁾ neustrezno črtaj / delete as appropriate

⁽²⁾ v primeru da je bilo ponovno cepljenje proti steklini opravljeno po izteku veljavnosti predhodnega cepljenja, se šteje kot primarno cepljenje / in the case that revaccination was done after the period of validity of previous vaccination, it is considered as primary vaccination