



HEALTH CERTIFICATE FOR THE EXPORT OF CATS TO ST. VINCENT & THE GRENADINES

I. COUNTRY OF ORIGIN: CANADA
NAME OF COMPETENT AUTHORITY: CANADIAN FOOD INSPECTION AGENCY

II. OWNER: Name: _____
Address: _____

III. DESCRIPTION OF ANIMAL(S)

Table with 6 columns: Name, Breed, Sex, Coat colour, Age, Microchip number

IV. HEALTH INFORMATION

I, the undersigned licensed veterinarian, certify that the animal(s) described above:

- 1. The animal(s) was/were born in and has/have never left Canada or where not born in Canada or has/have left Canada and returned, has/have been in Canada for the previous six (6) months.
2. The animal(s) is/are in good health and free from symptoms of any infectious or contagious disease.
3. During the twelve (12) months immediately preceding the exportation of the animal(s) there has been no rabies among unquarantined animals from _____, Canada (insert city, province) from which the animal(s) is/are exported.
4. The animal(s) has/have been vaccinated against Feline Rhinotracheitis, Panleukopenia, Feline Leukemia, Calicivirus and Chlamydophila psittaci.
5. The animal(s) has/have been treated for external parasites and for internal parasites with an approved broad spectrum anthelmintic within seven (7) days prior to date of export.
6. The animal(s) was/were implanted with an ISO microchip, followed by a rabies vaccination with an inactivated adjuvant vaccine, when the animal(s) was/were not less than twelve (12) weeks of age on:

Date of vaccination (yyyy/mm/dd): _____

Name of vaccine: _____ Serial #: _____

Date of expiration (yyyy/mm/dd): _____

Revaccination due (yyyy/mm/dd): _____

- 7. On _____ (insert date) being at least three (3) weeks following the rabies vaccination, a blood sample was taken from the said animal(s) following microchip identification, and tested for antibody level using the FAVN test at _____ Laboratory (approved by the Veterinary Authority in St. Vincent and the Grenadines)*

Once the animal(s) has/have a protective antibody level (>0.5 IU/mL) as established by the approved laboratory, the animal(s) can be exported to St. Vincent and the Grenadines.

Date (yyyy/mm/dd)

Signature of Licensed Veterinarian

Name and address of licensed veterinarian: _____

Date (yyyy/mm/dd)

Signature of Official Veterinarian
Canadian Food Inspection Agency
Government of Canada

Official Export Stamp

Name of Official Veterinarian (in block letters)

* List of approved laboratories:

1. Veterinary Laboratory Agency

New Haw, Addelstone, Surrey KT15 3NB
United Kingdom
Tel: (+44) 193 235 7841 Fax: (+44) 193 235 7239

2. BioBest

Pentlands Science Park, Bush Loan, Penicuik, Midlothian EH26 0PZ
United Kingdom
Tel: (+44) 0131 445 6101 Fax: (+44) 0131 445 6102
Website: www.biobest.co.uk

3. FAVN Rabies Laboratory

1800 Denison Avenue, Mosier Hall, Kansas State University
Manhattan, Kansas 66506-5601
Tel: (+1) 785 532 5650 Fax: (+1) 785 532 4481
Website: www.vet.ksu.edu/rabies E-mail: rabies@vet.ksu.edu

NOTES:

- The FAVN test must be used, NOT the RFFIT.
- Forty-eight (48) hours notice of arrival must be given and information must be provided concerning the name of owner, port of arrival and time of arrival. If arriving by airplane, the name of the airline and the flight number must also be provided.
- Phone: (784) 457-2452 or (784) 533-2473