

Veterinary Health Certificate for Export of Dogs and Cats from the United States of America to Barbados



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

Certificate Number

1. Consignor (name, address, and phone number):		2. Consignee (name, address, and phone number):	
3. Country Of Origin: United States		4. State Of Origin:	
5. Country Of Destination: Barbados		6. Zone of Destination: *****	
7. Place Of Origin: ***** ***** *****		8. Port of Embarkation / Border Crossing: ***** ***** *****	
9. Estimated Date Of Shipment:		10. Means Of Transport:	
11. Identification / Seal Numbers: ***** *****		12. CITES Permit Number: ***** *****	
13. Description Of Commodity: DOG(S) CAT(S)		14. ***** *****	
15. Total Quantity:		16. Total Number Of Packages/Containers: ***** *****	
17. Additional Information: ***** *****			
18. Identification / Seal Numbers: ***** *****			
19. Commodities Intended Use: Pet (Personal)		20. Type Of Admission: ***** *****	
21. Identification Of Commodities:			

ISO-Compatible Microchip Number	Species	Breed	Age	Sex



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Certification Statements:

1. Barbados Import Permit Number: _____
2. After due enquiry I am satisfied that: (choose the statement that applies)
 - a. The animals listed above have been resident in the United States or another category 1* country since birth or continuously for the past three (3) months;
 - b. The animals are travelling by sea from the United States to Barbados or have not been in the U.S. or another category 1* country for the last three months. If applicable, list countries of residence for 3 months prior to export:

Or

*see ADDENDUM 1 at end of certificate for list of Category 1 countries.

3. I, the undersigned, declare herewith that I have seen a certificate of vaccination against rabies for the animals described in box 21, as shown in the table below.

(Additional Rabies Vaccination Requirements/ information:

- a. The pets described above must have been vaccinated after the microchip was implanted
- b. Rabies vaccination should not be administered until the animals are at least three (3) months old
- c. If 2a is selected above, thirty-five (35) days must pass after the rabies vaccination before the pets are eligible to enter Barbados)

Microchip Number/Name	Date of Rabies Vaccination	Name & Manufacturer of Vaccine	Batch/Serial Number	Period of Validity	
				From	To

4. **ONLY REQUIRED FOR ANIMALS WHERE OPTION 2b WAS SELECTED ABOVE:** I, the undersigned, declare herewith that I have seen an official record of rabies neutralizing antibody titration test for the animal(s) described in box 21, carried out at an approved diagnostic laboratory, which states that the result of the test was greater than or equal to 0.5 IU/ml. (If 2b was selected above, 90 days must pass after the blood sample was taken before the pets are eligible to enter Barbados.)

Microchip Number	FAVN Sample Draw Date	FAVN Result	Laboratory Name & Address



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Certification Statements (continued):

5. I, the undersigned, declare herewith that:

- Leishmaniasis, Nipah virus, and Hendra virus are not endemic in the United States; and
- The animals described in box 21 have been tested within 30 days prior to export for the diseases as listed below with negative results: Heartworm (*Dirofilaria immitis*)

Note: Not applicable to cats, or dogs less than six (6) months of age

ELISA tests such as the IDEXX® SNAP® test kit may be used.

Microchip Number/Name	Date Performed	Dirofilaria immitis Test Result

6. (For dogs only:) Within seven (7) days of export, the animals were treated for:

- Ticks with a formulation approved for that purpose; **and**,
- Tapeworms with an anthelmintic containing praziquantel.

Microchip Number/Name	Tick Treatment		Tapeworm Treatment	
	Date & Time Performed	Product Used	Date Performed	Product Used

- The animals have been inspected by an accredited veterinarian and have been found to be free of fresh or healing wounds, and clinical signs of screwworm.
- The animals originate from a zone which is not under control for screwworm, and have not transited a zone under control for screwworm within the last 60 days.
- I, the undersigned Accredited Veterinarian, declare herewith that I have examined on the date indicated below, and within seven (7) days of travel, the animals described in box 21 and have found them to be clinically healthy, free from signs of contagious and infectious diseases, including rabies and external parasites and fit to travel.

This export health certificate is valid for a period of 10 days from the date of signature by the endorsing veterinarian. In the case of animals traveling by sea, validity can be extended for the period of the voyage.

Name of USDA-Accredited Veterinarian	Name of USDA Veterinarian
Signature of Accredited Veterinarian	Title of Official Veterinarian
Address of Accredited Veterinarian	Signature of USDA Veterinarian
Date	Date

ADDENDUM 1:

Category 1 Countries include: Andorra, Anguilla, Antigua & Barbuda, Aruba, Ascension Island, Australia, Bahamas, Barbados, Bermuda, BES Islands (Bonaire, St. Eustatius & Saba), British Virgin Islands, Canada, Cayman Islands, Channel Islands, Curacao, Dominica, European Union Member Countries, Falkland Islands, Faroe Islands, Fiji, French Polynesia, Greenland, Guam, Guadeloupe, Hawaii, Hong Kong, Iceland, Israel, Jamaica, Japan, Liechtenstein, Martinique, Mauritius, Mexico, Monaco,Montserrat, New Caledonia, New Zealand, Republic of Ireland, Russian Federation, St. Helena, St. Kitts & Nevis, St. Lucia, St. Maarten/St. Martin, St. Pierre & Miquelon, St. Vincent & The Grenadines, San Marino, Singapore, Switzerland, Taiwan, Trinidad & Tobago, Turks & Caicos Islands, United Arab Emirates, United Kingdom, United States of America, US Virgin Islands, Vanuatu, Vatican City State, Wallis & Futuna