

Veterinary Certificate for the Export of Dogs/Cats to Taiwan

Note: For dogs/cats from rabies-free countries (zones), BAPHIQ Form 001, dogs/cats from Thailand, BAPHIQ Form 003, dogs/cats from Malaysia, BAPHIQ Form 004, and cats from Australia, BAPHIQ Form 005 shall apply.

Certificate number: _____

Country (zone) of origin: _____ Import permit number: _____

Name and address of the exporter/consignor: _____

Name and address of the importer/consignee: _____

Description of the dog/cat

Species: _____ Breed: _____ Sex: _____

Microchip number: _____ Age or date of birth: _____

Note: The pregnant dog/cat will be allowed entry into Taiwan only if the pregnancy is under 4 weeks at the time of shipment.

Rabies vaccination (Note that only inactivated virus vaccine is acceptable)

Manufacturer and commercial name of vaccine: _____

Vaccination date: _____ (dd/mm/yyyy)

Primary vaccination Booster vaccination (please tick one)

Note: In the case of a primary vaccination, at the age of at least 90 days old, the period between the day of vaccination and the day of shipment shall be no less than 180 days and no more than one year. In the case of a booster vaccination, the dog/cat shall have been vaccinated no more than one year prior to shipment.

Rabies neutralization testing

Date of sampling: _____ (dd/mm/yyyy) Result: _____ IU/ml

Name and address of the laboratory: _____

Note: The dog/cat shall be sampled no less than 180 days and no more than 2 years prior to shipment using a neutralization antibody titration test with a titer of at least 0.5 IU/ml rabies antibodies in the blood. The test shall be carried out in a rabies reference laboratory of the World Organization for Animal Health (OIE) or a laboratory designated by the Bureau of Animal and Plant Health Inspection and Quarantine (BAPHIQ) of Taiwan.

Clinical examination

I, _____ (name of veterinarian in block letters), the undersigned licensed veterinarian certify that the dog/cat described above has been examined by me before departure on the date indicated below and it showed no clinical sign of rabies.

Date of examination: _____ (dd/mm/yyyy) Signature: _____

Transport

The owner has been advised that the dog/cat cannot be transshipped through Bangladesh or China (not including Hong Kong and Macao).

_____ Signature of Official Veterinarian		Official Stamp
_____ Name of Official Veterinarian in block letters		
Authority of Issuance: (full name in block letters)		Date: (dd/mm/yyyy)