According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0020. The time required to complete this information collection

OMB Approved 0579-0020

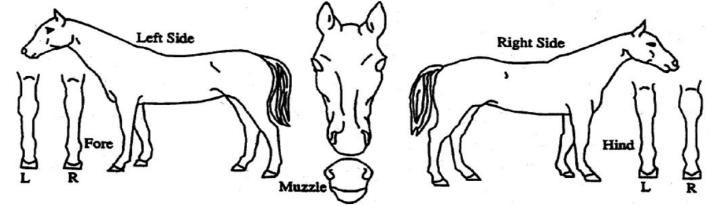
and completing and reviewing the collection of information.	EXP 08/2027						
UNITED STATES DEPARTMENT OF AGRICULTRE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES	UNITED STATES ORIGIN HEALTH CERTIFICATE FOR THE EXPORT OF HORSES FROM THE UNITED STATES TO CANADA PERMANENT EXPORT TEMPORARY EXPORT (*NOTE BELOW)						
NAME AND ADDRESS OF CONSIGNOR	NAME AND ADDRESS OF PLACE OF ORIGIN	NAME AND ADDRESS OF CO	NSIGNEE				
CERTIFICATION STATEMENTS							
 The horse was, to the best of my knowledge and be inspection. 	pelief of the issuing veterinarian, not exposed to any commu	unicable disease within 60 days p	receding the date of				
The horse identified below was inspected within 30 thereto.	0 days prior to export and found to be healthy and free from	n evidence of communicable disea	ases and exposure				

Either (check appropriate box)

- □ 3. The horse has resided in the United States or Canada since birth.
- □ 4. The horse has met all of the import requirements of the United States and has resided in the United States for the past 60 days.
- □ 5. The horse has resided in the United States for less than 60 days and is accompanied by a health certificate from each country in which the horse has resided during the 60 days prior to entry into Canada.
 - 6. The horse was tested negative for equine infectious anemia using the \Box agar gel immunodiffusion (coggins) test or \Box ELISA at:

of the following the equation of equations are the equation of the equation (coggins) to the equation of the e							
Name of Laboratory	Date Blood Sample Drawn	Sample Drawn by Me or (name of accredited veterinarian)	State Accredited In				
		,					
Laboratory Accession Number		Health Certificate Number					
USDA ACCREDITED VETERINARIAN		ENDORSING FEDERAL VETERINARIAN					
Signature		Signature and Seal					
g		- · · · · · · · · · · · · · · · · · · ·					
Name (type/print)	Date	Name	Date				
(9) - (-) - (-)		1.00.00					
1		Valid only if the USDA Veterinary Seal appears over the signature of the endorsing					
** Health Certificate valid for 30 days from the date of issuance							
		Federal Veterinarian and health certificate number.					

Ensure that the diagram and written description agree. White markings and whorls must be shown.



Name	Breed	Age	Color	Sex		
WRITTEN DESCRIPTION						
HEAD	LIMBS					
	LF		RF			
BODY						
ACQUIRED MARKS (scars, tattoos, etc.)	LH		RH			

Instructions: Mark the diagram with the exact position of any distinguishing marks, scars, or brands. Brands to be drawn in position. Scars to be marked and indicated with an arrow (->). Stars or blazes on the face and any other markings to be drawn in on the diagrams showing position shape as accurately as possible. Whorls should be marked with a (X). If no markings – this fact should be

*NOTE: The original copy of the health certificate must remain with the horse if the horse is being temporarily exported. Any clearance by Customs, such as a stamp, must be affixed on the reverse side of the original health certificate. Horses temporarily exported to Canada must return within 30 days of the date of issuance of the health certificate. Exhibition horses must return 90 days from entry into

"*NOTE: The date of issuance must be the date of veterinary inspection.

Exporter must furnish four (4) copies for USDA endorsement. The original and two (2) copies accompany the shipment, the fourth copy is for the Veterinary Services Assistant District Director's office.