

INTERNATIONAL HEALTH CERTIFICATE FOR DOGS AND CATS BEING EXPORTED TO THE TURKS AND CAICOS ISLANDS
FROM THE UNITED STATES OF AMERICA OR CANADA

PART I: Details of Dispatched Consignment				
I.1. Consignor Name: Address: Zip Code: Telephone: Fax: Email:		I.2. Certificate Reference Number: I.3. Veterinary Authority: I.5. Country of Export USA <input type="checkbox"/> CANADA <input type="checkbox"/> I.6. ISO Code US <input type="checkbox"/> CA <input type="checkbox"/> I.7. Country of Destination TURKS AND CAICOS ISLANDS I.8. ISO Code TC		
I.4. Consignee Name: Address: Zip Code: Telephone: Fax: Email:		I.9. Description of Commodity (stipulate breed, colour & sex) I.10. Commodity Code (HS Code) 010619		
I.11. Commodity Intended for use as: Pets <input type="checkbox"/>		I.12. Total Quantity		I.13. Import Admission Type Single (Definitive) Entry in TC
PART II: Sanitary Requirements				
II. Sanitary Requirements for Exportation				
I, the undersigned * <input type="checkbox"/> Licensed Veterinarian / * <input type="checkbox"/> Accredited Veterinarian, certify that the identity of the animal (s) listed at I.14 is true and correct. I have also inspected the said animal (s) on the date written below and *found it/ *found them to be clinically healthy and free from contagious or infectious diseases and free from external parasites. I further declare that the animal (s) listed on this certificate *has met /*have met the following requirements:				
II.1. permanently identified with a microchip transponder or tattoo. The microchip is able to be read by a microchip reader and that the chip was placed before the primary rabies vaccination was given;				
II.2 the dog(s) *is/*are vaccinated against Canine Parvovirus, Distemper, Hepatitis/Adenovirus, Parainfluenza, Leptospirosis and				
<input type="checkbox"/> *has/*have been vaccinated against Lyme disease in accordance with the manufacturer's data sheet or				
<input type="checkbox"/> *has/*have tested serologically negative for Lyme disease not more than 10 days prior to the date of shipment. (Idexx SNAP® 4Dx Plus® is acceptable for Lyme disease screening). Please tick the appropriate option;				
II.3. the cat(s) *is vaccinated/*are vaccinated against Feline Calicivirus, Panleukopaenia, Feline Rhinotracheitis and Feline Leukaemia according to the manufacturer's data sheet.				
II.4. That the animal(s) *was treated/*were treated against internal and external parasites within 14 days of the scheduled date of shipment:				
a. For ticks, a preparation known to have residual action should be used, e.g. products containing fipronil, amitraz, pyrethrins and permethrins. The following products are not acceptable: Shampoos, collars and products used for flea control only (e.g. Program®, Advantage®, Revolution® or Sentinel®)				
b. For tapeworms (<i>Echinococcus multilocularis</i>), a product containing praziquantel given at a dose rate of 5mg/kg. Please note that the date of this treatment must precede the date the certificate is signed. Please insert information below.				
	Name and Manufacturer of Product	Date Given (dd/mm/yyyy)	Microchip/Tattoo Number	Administering Veterinarian's Name and Signature
Echinococcus (tapeworm) Treatment	1			
	2			
	3			
	4			
	5			

II.a. Certificate Reference Number Continued:				
	Name and Manufacturer of Product	Date Given (dd/mm/yyyy)	Microchip/Tattoo Number	Administering Veterinarian's Name and Signature
External Parasite Treatment	1			
	2			
	3			
	4			
	5			

II.5. The animal (s) *was vaccinated/*were vaccinated or revaccinated against rabies:

- a. using an inactivated adjuvant vaccine, in accordance with the recommendations of the manufacturer. The vaccine should have been produced and used in accordance with the OIE Terrestrial Manual. Primary (initial)vaccinations must be given not less than 3 months of age;
- b. and *was subjected/ *were subjected not less than 30 days after vaccination is completed to a blood test (Fluorescent Antibody Virus Neutralisation Test) which must have been conducted in a laboratory approved by the Animal Health Service for that purpose with a positive result of at least 0.5IU/ml; and
- c. any subsequent booster vaccines given after the rabies titres, were given before the expiration date (period of validity) of the previous vaccination (that is to say, the vaccine administrations must overlap). **Please see Note B below;**

II.6. The details of the current rabies vaccination and the date of the sampling for the rabies titres are as follows below:

Microchip/Tattoo Number	Date of Vaccination (dd/mm/yyyy)	Name of Vaccine Manufacturer	Batch Number	Period of Validity dd/mm/yyyy		Date of Sampling of titre test (dd/mm/yyyy)
				From	To	
1						
2						
3						
4						
5						

II.7. *I spayed/neutered the dogs (s) as the case maybe* or *After a clinical inspection and on the basis of the signed owner declaration below, I am satisfied the dogs(s) *has been/ *have been spayed or neutered*. **Please see Note A (1) below**

***Delete as applicable**

Licensed/Accredited Veterinarian

Licence/Accreditation Number:

Name : _____

Address: _____

Telephone Number: _____

Date (dd/mm/yyyy): _____

Place Signature here

Place Stamp/Seal here
(Where applicable)

II.a. Certificate Reference Number Continued:

I, the undersigned **OFFICIAL VETERINARIAN (CFIA or USDA/APHIS)**, certify:

That this certificate was issued not more than ten (10) days prior to the date of shipment of the above mentioned commodity(ies)

NAME (All Capitals letters):

QUALIFICATION AND TITLE:

PLACE STAMP/SEAL HERE

PLACE SIGNATURE HERE
(different colour than of printing on this certificate)

Date of Issuance(dd/mm/yyyy)_____

THIS CERTIFICATE IS NOT VALID UNLESS IT IS SIGNED AND STAMPED OR SEALED. FOR ONE USE ONLY

OWNER DECLARATION (TO BE SIGNED BY OWNER OR AGENT FOR OWNER)

I, the undersigned
(owner or the agent of the owner who is responsible for the animal(s) described above)

- a. Declare that the animal (s) will accompany me, the owner, or the agent that I have designated to be responsible for the animal(s) on my behalf and *they are not intended/* it is not intended to be sold or transferred to another owner.
- b. I further declare, that where the animal (s) is or are dog (s), *that they are* / *that it is* spayed or neutered as the case maybe.

*NB. If you have been granted a breeders licence by the Animal Health Service, please strike out **section b.***

***Delete as applicable**

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

Notes for Veterinarians and Exporters

A. Prohibitions

- 1. Dogs must be spayed or neutered, as the case maybe, before importation into the Islands. Persons granted an animal breeder's licence from the Department of Agriculture, Turks and Caicos Islands are exempted from having their dogs spayed or neutered. **Veterinarians, please strike through section II.7. when the importer presents a breeder's licence issued by the Animal Health Service, Department of Agriculture, Turks and Caicos Islands Government.**
- 2. The following breeds (including crosses) of dog are **PROHIBITED** to be imported into the Turks and Caicos Islands: Dogo Argentino; American Pit Bull Terrier; American Staffordshire Terrier; American Bull Dog; Japanese Tosa; Perro de Presa Canario (Canary dog); and Fila Brasileiro; and
- 3. Please contact the Department if you are attempting to import a dog on the **RESTRICTED LIST**: Appenzeller; Aryan Molossus; Bandog; Beauceron; Belgian Mastiff; Bull Mastiff; Danish Broholmer; Dogue de Bordeaux; Great Swiss Mountain Dog; Korean Jindo; Kuvasz; Leonberger; Moscow Watchdog; Neapolitan Mastiff; Perro de Presa Mallorquin; Rottweiler; Boerboel; and the Tibetan Mastiff.

B. Rabies Titres

1. **Animals originating from the USA or Canada are only required to have their titres done once in the animal's lifetime providing that:**
 - a. all booster vaccines are given before the expiration date of the previous vaccination (based on the manufacturer's declaration on the duration of immunity) or the rabies titre test must be repeated as at **II.5. b** above.
2. **Rabies laboratories approved by the Animal Health Service can be found at:**
<http://www.who-rabies-bulletin.org/travel/laboratories.aspx> or http://ec.europa.eu/food/animal/liveanimals/pets/approval_en.htm;

C. Documentation

1. If additional sheets of paper or supporting documents are attached to this international health certificate, those sheets of paper or document shall also be considered as forming part of the original of the international health certificate by the application of the signature and stamp of the official veterinarian, on each of the pages;
2. This certificate should be completed, signed and stamped in any colour other than black;
3. When the certificate, including additional sheets referred to in (i), comprises more than one page, each page shall be numbered, (page number) of (total number of pages), at the end of the page and shall bear the certificate reference number that has been designated by the competent authority at the top of the pages; and
4. The animals must be accompanied at the point of entry by all relevant documents (import permit, and **originals** of the International Health Certificate, vaccination certificates, Spay/neuter certificates, Laboratory Test results, etc.) in order to facilitate biosecurity clearance.

D. Animal (s) in Transit

In the event that during the course of transporting the animal to the Turks and Caicos Islands, it was transshipped via another country and remained there for twenty-four (24) hours and over, a veterinary certificate from the Veterinary Authority or from the Quarantine Officer must be obtained stating that the said animal (s) did not leave the quarantine area, noting the period of time in quarantine and the condition of the animal (s);

- E.** Animal(s) must be kept in confinement (in their carrier) until inspected and granted biosecurity clearance to entry into the territory. Failure to do so can result in entry being denied; and
- F.** The animal(s) must be **found clinically healthy** on arrival at the port of entry.