# Monticello Pet Hospital Travel Health Certificate Questionnaire

Thank you for choosing Monticello Pet Hospital for your pet's travel needs. Please ensure that the information you fill out on this form is accurate. We will use this information to fill out the necessary paperwork for your pet. This form must be returned to the Monticello Pet Hospital within 72 hours of scheduling your pet's appointment. Please email this form to info@montipet.com or fax form to (763) 295-5410. If you have any questions before your visit, please don't hesitate to contact us.

### \*\*Monticello Pet Hospital will not be responsible for any inaccurate information provided by the client\*\*

# **PET'S INFORMATION:** Pet's Name: \_\_\_\_\_\_ Species: \_\_\_\_\_\_ Breed: \_\_\_\_\_ Pet's Date of Birth: \_\_\_\_\_\_ Sex: \_\_\_\_\_ Altered: □ YES □ NO Pet's Color: Weight: **CLIENT'S INFORMATION:** Consignor/ Client's Name: Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_ Address Pet is leaving from: City: State/Zip: County: **DESTINATION INFORMATION:** Consignee Name (if different from owner): Address of Final Destination: City: \_\_\_\_\_ State/Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Destination Phone Number: **TRAVEL PLANS:** Date of Departure: Date of Arrival at Final Destination: Will you be traveling with your pet? $\Box$ YES $\Box$ NO Will your pet be traveling with someone other than yourself? $\Box$ YES $\Box$ NO If YES, please specify: How will your pet be traveling? □ Flying in Cabin □ Flying in Cargo □ In Car □ Other: If flying, what airline:

**AIRLINES:** Please be aware that airlines have their own requirements for travel, so in addition to making a reservation for your pet, you will need to make sure that you have all the necessary documents.

# VACCINE HISTORY:

Where was the r	nost-recent vaccinations done (if not here)?
Clinic Name:	
Phone Number:	

We must have hard copies of your pet's Rabies certificate and other vaccinations at time of health certificate appointment if vaccinations were not performed at Monticello Pet Hospital. Any vaccines not current or without proper documentation will need to be updated based on destination requirements before the health certificate can be issued. Some countries have a waiting period after vaccination before an animal can be admitted to the country, check USDA APHIS requirements. Information below.

#### **MICROCHIP:**

Where did your pet get their microchip (if not here)?	
Microchip Number:	
Date of Microchip Placement:	

Please be aware that depending on the destination, your pet needs to have a microchip and the chip must meet ISO standards. ISO standards state that the microchip must be 15 digits long.

## **ADDITIONAL INFORMATION:**

\*You must visit the USDA APHIS website (<u>http://www.aphis.usda.gov/aphis/pet-travel</u>) to make sure your pet meets all the requirements for entry at your destination.

\*To ensure you get your documents back in time for your trip, please schedule your appointment with us within the time frame required for the destination. It may take our office 48 hours to complete the certificate.

### **SIGNATURE:**

I acknowledge that I have read through this form in its entirety and have visited the USDA APHIS website to make sure my pet meets all the requirements for entry at my destination.

Client's Signature

Date

Monticello Pet Hospital 4134 School Blvd, Monticello MN 55362 Phone (763) 295-3410 Fax (763) 295-5410 info@montipet.com