Health Certificate

Current

Consigner First and Last
(Owner)

Consignor physical address
(City, State, Zip code, County)

Consigner phone number

Email address

Airline Name

Destination

Consignee
(Owner or Pick-up person if different)

Consignee physical address
(City, State, Zip code, County)

Consignee phone number

Date of Transportation

Traveling in Cargo or Air Cabin

Reason for Transport (relocating, sale, travel, breeding, training, medical, companion animal, etc.)

Pet name	Breed	Microchip #	Rabies Serial & Tag #	Fecal
Pet name	Breed	Microchip #	Rabies Serial & Tag #	Fecal
Pet name	Breed	Microchip #	Rabies Serial & Tag #	Fecal
Pet name	Breed	Microchip #	Rabies Serial & Tag #	Fecal

If your pet has had a rabies vaccination at another clinic, please provide rabies serial number and rabies tag number.

Revision Fee: $25

For Veterinary Technician

Rabies Manufacturer:
Rabies Lot Number:
Rabies Expiration Date:

make sure frontline applied and documented