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MINISTRY OF AGRICULTURE & CO-OPERATIVES DEPARTMENT OF LIVESTOCK DEVELOPMENT, THAILAND VETERINARY HEALTH CERTIFICATE

Name and address of the government authorities of the exporting country	:

Export of Research Rodents (mouse, rat, guinea pigs hamsters, etc.)

Name & Addı	ress of Exporter	Name & Address of Importer	
Origin of Animal (S)			
Name and address of consignor :			
Name :			
Address :			
facility that animal(s) was/were bo	rn and kept :		
Name:			
Address :			
facility number (if any):			
Species	Breed or Trade name	Sex	Number

Means of Transportation Flight number

Place and date of boarding/ loading_____

SANITARY INFORMATION

I, the undersigned, certify that the animal described above meets the requirements.

- (1) The animals have been stored since birth in a place that is in a storage facility meeting all of the following, that has been isolated from other areas, and in which there have been no other animals than such rodents.
 - Feeding control (hereafter including the management of records of the animals and their breeding, shipment and death) and sanitary control are carried out under the supervision of a committee consisting of members concerned including veterinarians in the facility.
 - 2. Appropriate measures are taken to ensure that the intrusion of animals from outside is prevented.
 - 3. When introduced into the facility, the animals are confirmed not to be contaminated with pathogen of infectious disease in order to prevent the intrusion of pathogens of infectious disease that may infect humans through animals.
 - 4. Examination are conducted periodically on all the animals stored in the facility to confirm they are not contaminated with pathogens of infectious disease.
 - Information concerning the feeding and sanitary controls of the animals is recorded in documents and such documents are retained.

(2) Since births, the animals have not been used in any study with pathogens of infectious disease or have not come in contact with any animal used in such a study.

REMARKS: (This certificate is valid 10 days after issuance)

Signature.....

(Name of veterinarian in block letters)

Authorized Veterinary Officer

Bureau of Disease Control and Veterinary Services

Official stamp.

Date_____