



**COOPERATIVE REPUBLIC OF GUYANA
MINISTRY OF AGRICULTURE
GUYANA LIVESTOCK DEVELOPMENT AUTHORITY
ANIMAL HEALTH UNIT
(Animal Health Act, 2011)**



PERMIT ID. WL/IHVC:

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INTERNATIONAL VETERINARY HEALTH CERTIFICATE

Part 1:

- Name and Address of Government Authority: GUYANA LIVESTOCK DEVELOPMENT AUTHORITY,
PLANTATION MON REPOS, TRACT GLDA,
MON REPOS, EAST COAST DEMERARA, GUYANA

DESCRIPTION

- SPECIES OF ANIMAL : Mammals
- HEALTH CERTIFICATE # :
- Identification and Quantity of ANIMAL :

| <i>Scientific Name</i> | <i>Common Name</i> | <i>Quantity</i> | <i>CITES #</i> |
|------------------------|--------------------|-----------------|----------------|
| | | | |
| | | | |

- Country of Export & Origin: GUYANA, South America
- Country of Destination: JAPAN
- Name and Address of Consignor:
- Name and Address of Consignee:
- Address of approved Quarantine Facility:
- Name of Vessel or flight number:
- Place of boarding or loading:
- Date of boarding or loading:

Official Seal

Official Stamp

Permit ID.WL/IHVC:

Appendix 2- Mammals

Part 2:

ZOOSANITARY INFORMATION

I,, a veterinarian authorized hereto by the Veterinary Administration of **GUYANA**, hereby certify that:

1. The animal(s) show(s) no clinical signs of rabies at the time of shipment.

2. The animal(s):

~~Has/have been kept for the past 6 months, or since birth or capture in a region that the Minister of Health, Labour and Welfare of Japan has designated as one where rabies has not been reported. (1)~~

~~has/have been kept for 12 months or since birth in a storage establishment where rabies has not been reported for the past 12 months in a non-designated region. (2)~~

~~has/have been kept for the past 6 months or since birth in a quarantine establishment in a non-designated region. (3)~~

~~is/are confirmed to have met either of conditions (2) or (3) when imported from a non-designated region to a designated region and has been kept in a designated region since then.(4)~~

SPECIMEN

Check the appropriate box

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Name and Title of Official Veterinarian

Signature of Official Veterinarian

Date Issued

Official Seal

Official Stamp