Health Certificate Form

For travel by plane within the continental US, we do not do international health certificates.

OWNER TO FILL OUT:

Full name of person traveling with or shipping pet:	
Best contact phone number for person traveling with or shipping pet:	()
Email address:	
Date of flight:	
Address coming from (Address, City, Zip Code):	
County coming from: (Ex: Snohomish, King)	
Address of destination (Address, City, Zip Code):	
County of destination:	
Full name of person receiving pet if not traveling with pet:	
Purpose of transit: (personal, breeding, competition, sale, relocating)	
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Clinic use:	
Pet's name:	Dog or Cat
Sex:	Breed:
Pet's microchip number:	
Age:	Rabies tag number:
RV date given:	RV Expiration date:
Rabies Vaccine serial/lot number:	Manufacturer/brand:

https://data.oda.state.or.us/fmi/webd/OVIS