



#### COOPERATIVE REPUBLIC OF GUYANA MINISTRY OF AGRICULTURE GUYANA LIVESTOCK DEVELOPMENTAUTHORITY 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 the government Authority: Guyana Livestock Development Authority Plantation Mon Repos, Tract GLDA

Plantation Mon Repos, Tract GLDA Mon Repos, East Coast Demerara, Guyana.

### DESCRIPTION

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

Scientific Name	Comn	non Name	Quantity	CITES/ NON CITES #
				•

Country of Export & Origin:

GUYANA, South America

- Country of Destination:
- 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

#### Part 2:

#### ZOOSANITARY INFORMATION

I, the undersigned, 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.

<ol> <li>The animal(s):</li> <li>Has/have been kept for the past 6 months, that the Minister of Health, Labour and We</li> </ol>	, or since birth or capture in a region elfare of Japan has designated as one where	rabies has not been reported. (1)
has/have been kept for 12 months or since months in a non-designated region. (2)	e birth in a storage establishment where rabi	es has not been reported for the past 12
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 con has been kept in a designated region since	then.(4)	designated region to a designated region and
	<u>Check th</u>	<u>e appropriate box</u>
Name and title of Official Veterinarian	Signature of Official Veterinarian	Date issued:
Official Seal		Official Stamp