

Animal Health Certificate Appointment Request Form

Please complete one questionnaire per pet travelling to an EU country or Northern Ireland and return it to contact@bathvetgroup.co.uk prior to us contacting you with an appropriate appointment. Please check your junk and spam folders for email confirmation.

Owner details: (THIS MUST BE THE PERSON ATTENDING THE APPOINTMENT AND SIGNING THE PAPERWORK)	Name: Address: Telephone: Email:
Pet details:	Name: Date of birth: Gender: Breed: Colour:
Number of pet(s) travelling together: <i>(maximum of five pets per trip)</i>	
Country of first destination: <i>(N.B. First destination is your entry point into the EU and may be different to your final destination)</i>	
<u>Date of departure:</u> <i>(the AHC is valid for entry to an EU country and Northern Ireland for 10 days after date of issue - please allow 48 hrs for the AHC to be issued by your vet)</i>	
Date of re-entry into the UK:	

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<p>Date(s) available for the AHC appointment: <i>(please provide ALL dates available up to 10 days prior to your date of departure)</i></p>	
<p>Bath Vets location of choice: <i>(please tick as many that apply)</i></p>	<p> <input type="checkbox"/> Cat Clinic <input type="checkbox"/> Keynsham <input type="checkbox"/> Melksham <input type="checkbox"/> Peasedown <input type="checkbox"/> Station Road <input type="checkbox"/> Rosemary Lodge </p>
<p>Identification system: <i>(implant/reading must be before or on the same day as Rabies vaccination)</i></p>	<p>Microchip number:</p>
<p>Rabies vaccination: <i>(your pet needs to be at least 12 weeks of age at the time of vaccination and at least 21 days needs to have elapsed after the primary rabies vaccination before an AHC appointment can be made. If your pet has not had a rabies vaccination we will be in touch to offer you a suitable time and date in relation to your travel plans)</i></p>	<p>Has your pet ever had a rabies vaccination? yes/no <i>(delete as appropriate)</i></p> <p>If no, do you require us to book an appointment in for the rabies vaccination? yes/no <i>(delete as appropriate)</i></p> <p>If yes, when was the date of their last rabies vaccination?</p> <p>Do you have proof of rabies vaccination? yes/no <i>(delete as appropriate)</i></p>
<p>Date of normal booster vaccinations: <i>(rabies vaccination cannot be given at the same time as your pet's normal vaccinations)</i></p>	
<p>Anti-parasitic tapeworm treatment required prior to departure: <i>(This is required for direct travel to Finland, Malta, Northern Ireland, Norway or the Republic of Ireland)</i></p>	<p>yes/not applicable <i>(delete as appropriate)</i></p>