

## Form containing information on a pet animal originating from Ukraine

### Information on the owner / other person

Name, surname

Address of the place of residence in the Czech Republic

Street .....	No .....
Municipality/Municipality part .....	
Postal code .....	

Phone No

E-mail address

### Information on the animal

Species

Date and result of the first clinical examination of the animal

Microchip No

Date of the microchip application

Date and result of the second clinical examination of the animal

Date of anti-rabies vaccination

Date of vaccination passport issuance

or Date of pet passport issuance + pet passport No

Address of the place of quarantine of the animal

Street .....	No .....
Municipality/Municipality part .....	
Postal code .....	

Name and surname of the official veterinarian(s) + CV certificate No

--

In ..... on .....

-----  
Signature of the  
owner/other person

-----  
Stamp and signature  
of the private veterinarian(s)