



Instructions

The purpose of this form is for an official government veterinarian employed by the competent authority of the exporting country to certify that:

- the animal being imported into Australia has been vaccinated against rabies.
- the veterinarian has sighted a rabies neutralising antibody titre test (RNATT) laboratory report that indicates the animal has sufficient antibodies.

This form covers cats and dogs imported into Australia under group 3 country conditions or non-approved via group 2 or 3 country conditions.

Before completing this form the official government veterinarian must ensure that all treatments, vaccinations and collection of blood samples were performed in a country approved by the Australian government. Testing is required to be performed in a country approved by the Netherlands government.

Strike through any errors (do not use correction fluid). Ensure corrections are legible, handwritten and signed, dated and stamped by the official government veterinarian.

* The list of approved countries for the direct import of cats and dogs to Australia can be found on the department's website at agriculture.gov.au/biosecurity-trade/cats-dogs/step-by-step-guides.

Koninkrijk der Nederlanden

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|---|--|---|---|---|
| Koninkrijk der Nederlanden | Kingdom of the Netherlands | Königreich der Niederlande | Royaume des Pays-Bas | Reino de los Países Bajos |
| Ministerie van Landbouw, Natuur en Voedselkwaliteit | Ministry of Agriculture, Nature and Food Quality | Ministerium für Landwirtschaft, Natur und Lebensmittelqualität | Ministère de l' Agriculture, de la Nature et de la Qualité des Aliments | Ministerio de Agricultura, Naturaleza y Calidad Alimentaria |
| Nederlandse Voedsel- en Warenautoriteit | Netherlands Food and Consumer Product Safety Authority | Niederländische Behörde für Lebensmittel- und Produktsicherheit | Autorité néerlandaise de sécurité sanitaire de l'alimentation et des produits de consommation | Autoridad holandesa de la seguridad Alimentaria y de los Productos de consumo |

RABIES NEUTRALISING ANTIBODY TITRE TEST (RNATT) DECLARATION FOR THE EXPORT OF DOGS AND CATS FROM THE NETHERLANDS TO AUSTRALIA

Section A: Official Government Veterinarian

1. Name:

2. Competent authority of the exporting country:
Netherlands Food and Consumer Product Safety Authority (NVWA)

3. Address of the competent authority:

Street address (PO box not accepted): Catherijnesingel 59

Suburb/Town/City: Utrecht

State / province: Utrecht

Zip / Postcode: 3511 GG

Country: The Netherlands

Section B: Animal identification details

4. Name of animal:

5. Date of birth (dd/mm/yy):

| | | |
|--|---|--|
| <i>Date</i> | : | |
| <i>Signature of Official Government Veterinarian</i> | : | |
| <i>Stamp of Official Government Veterinarian</i> | : | |

6. Sex: Male Neutered male Female Neutered female
7. Description (breed, colour, weight, and distinguishing marks/features):
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8. Microchip number (must be 10 or 15 digits):

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|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
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|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|

Second microchip number (if required)

| | | | | | | | | | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|

Section C: Rabies vaccination

9. Date of the last rabies vaccination (dd/mm/yyyy): _____
10. Name of vaccine: _____ 11. Batch number: _____
12. Expiry date: _____ 13. Booster due date: _____
14. Was the animal at least 12 weeks (84 days) of age when it had its last rabies vaccination before blood sampling for the RNATT?
- YES – go to section D NO – do not complete this declaration

Section D: Rabies neutralising antibody titre test results

15. Did a testing laboratory approved by the competent authority of the Netherlands issue the RNATT?
- YES – go to next question NO – do not complete this declaration

16. Name of the testing laboratory: _____

17. Address of testing laboratory:

Street address (PO box not accepted):

Suburb/Town/City: _____ State / province: _____

Zip / Postcode: _____ Country: _____

| | | |
|--|---|--|
| <i>Date</i> | : | |
| <i>Signature of Official Government Veterinarian</i> | : | |
| <i>Stamp of Official Government Veterinarian</i> | : | |

18. Microchip number that appears on the RNATT report (must be 10 or 15 digits):

Second microchip number (if applicable):

19. Name of the government-approved veterinarian who collected the blood sample:

20. Address of the veterinary clinic where the blood sample was collected

Street address (PO box not accepted): _____

Suburb/Town/City: _____ State / province: _____

Zip / Postcode: _____ Country: _____

21. Country where the blood sample was collected: _____

22. Was the blood sample collected in a country approved by the Australian Department of Agriculture, Fisheries and Forestry to export dogs and cats to Australia*?

YES – go to next question

NO – do not complete this declaration

23. Can you confirm that no amendments have been made to the place of sampling, date of sampling and microchip numbers on the laboratory report?

YES – go to next question

NO – do not complete this declaration

24. Blood samples for the RNATT were collected on (dd/mm/yyyy): _____

25. The date the testing laboratory received the blood sample was (dd/mm/yyyy):

26. The RNATT result is at least 0.5 IU/ml as per international standards

YES – go to next question

NO – do not complete this declaration

27. Name of person completing RNATT declaration: _____

| | | |
|--|---|--|
| <i>Date</i> | : | |
| <i>Signature of Official Government Veterinarian</i> | : | |
| <i>Stamp of Official Government Veterinarian</i> | : | |

Section E: Official Government Veterinarian declaration

To be completed by the person named in section A of this form.

I declare that:

- I have sighted a current rabies vaccination certificate and RNATT laboratory report for the animal identified in section B.
- the information I have provided is true and correct to the best of my knowledge.

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|--|--|
| <hr/> <i>Signature of Official Government Veterinarian</i> <i>Stamp of Official Government Veterinarian</i> | Country of export: The Netherlands |
| | Competent Authority: Netherlands Food and Consumer Product Safety Authority (NVWA) |
| | Date certificate completed: <i>(day/month/year)</i> |
| | Name: |
| | Address: Catherijnesingel 59 3511 GG Utrecht |
| | Phone number: 088-2232100 |
| | Email contact: dpp@nvwa.nl |