	For Official Use Only	y Entered:
pet passport	Passport No.	Checked:
system	IEA	Issued:
Line of Barrier	ION FORM FOR AN EU PE	
	ETS PREPARED IN IRELAND O bring this application form to your vet	
	IST BE LEGIBLE AND COMPLET	
SECTION 1: OWNER DETAIL	<u>S</u>	
Christian Name:	Surname:	
Address:		
	Telephone	
Intended Date of Travel Abro	ad:	(Enter "None" if not travelling
SECTION 2: DESCRIPTION	OF PET	Please circle as appropriate
Name:	S	Species: Dog / Cat / Ferret
Breed:		Sex: Male / Female
Date of Birth://	P	'hotograph attached: Yes / No
Coat colour <u>and</u> type:		
		6 cms
OPTIONAL PHOTOGRAPH	1 / 1 C / 1 / 1	
If included, please enclose a clear Write the microchip number or national sector of the sector of		4 cms
using a paperclip. Do not staple or		
application form.		Check photo size here.
SECTION 3: IDENTIFICATIO	N OF ANIMAL	DO NOT AFFIX
		▼

Date of microchipping:

Location of microchip: (e.g. neck, shoulder, etc.)_____

SECTION 4: VETERINARY PRACTITIONER DETAILS

Veterinary Practitioner name:_____

Name of Practice:_____

Address of practice:_____

Telephone No(s):____

SECTION 5: DECLARATION BY VETERINARY PRACTITIONER

I hereby declare that the particulars stated on this form are true and correct to the best of my knowledge.

Signature:______Date:____/___/

Completed application forms should be sent to: The Department of Agriculture and Food, Special Projects Unit, Floor 4 Centre, Agriculture House, Kildare Street, Dublin 2. All pet passports are issued by registered post directly to your Veterinary Practitioner.