



DECLARATION FORM FOR PASSENGER - ANIMAL/PET OWNER

NAME OF VESSEL	DEPARTURE DATE	PORT OF DEPARTURE	PORT OF ARRIVAL	TICKET NUMBER OF THE ANIMAL/PET OWNER

ANIMAL OWNER / HANDLER'S NAME/SURNAME	ANIMAL OWNER / HANDLER'S PHONE NUMBER	ANIMAL/PET HEALTH DOCUMENTATION NUMBER	ANIMAL/PET IDENTIFICATION NUMBER	TYPE OF ACCOMMODATION (PET KENNEL, PET CABIN, PERSONAL ANIMAL CARRIER)

DESCRIPTION OF THE ANIMAL	LARGE ANIMALS/PETS (OVER 10 KILOS)	SMALL ANIMALS/PETS (UNDER 10 KILOS)
COMPANION PET WEIGHT		
HAS THE COMPANION ANIMAL/PET BEEN VACCINATED ACCORDING TO THE RELEVANT PROVISIONS/REQUIREMENTS (FILL IN YES/NO)		
PET/ANIMAL STATUS CATEGORY COMPANION PET / THERAPY PET / ASSISTANCE PET / SERVICE PET		
REMARKS		

I DELCARE RESPONSIBLY THAT I AM SIGNING AN OFFICIAL DOCUMENT AND THE ABOVE INFORMATION IS TRUE.

DATE

THE DECLARANT

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SIGNATURE OF THE ANIMAL HANDLER / ESCORT / OWNER