

**FORM A**

**IMPORTATION OF DOGS AND CATS ORDERS 1929-1970**

**APPLICATION FOR A LICENCE TO LAND A DOG OR CAT FOR DETENTION ON  
THE PREMISES OF A VETERINARY SURGEON**

1. Description of animal(s)

Type of animal (Dog/Cat)	Breed	Full description, stating colour and distinctive marks	Name	Sex	Age

2. Location of animal(s) at date of this application \_\_\_\_\_

3. Airport of embarkation \_\_\_\_\_

4. Name and permanent Irish address of owner \_\_\_\_\_  
\_\_\_\_\_

5. Reasons for importation of the animal(s) \_\_\_\_\_

6. Airport of landing \_\_\_\_\_

**Note:** If landed at Cork or Shannon airports the animal(s) must be transhipped **by air** to Dublin Airport.

7. Approximate date of landing in Ireland \_\_\_\_\_

8. Name and full address of the person to whom the licence, if granted, is to be sent:  
\_\_\_\_\_  
\_\_\_\_\_

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| 9. Have you made arrangements with:   |                          |                          |
| (a) the owner of the quarantine premises for accommodation of the animal(s) for the six months period?              | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) the approved carrying agents i.e. Kelly Couriers for the conveyance of the animal/s to the quarantine premises? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do you wish to apply for Private Quarantine and receive a copy of our detailed specifications ?                 | <input type="checkbox"/> | <input type="checkbox"/> |

**CONDITIONS ATTACHED TO A LICENCE, IF GRANTED**

1. The animal/s must be landed within the period specified in the licence, and only if separately confined in a suitable hamper, crate, box, or other receptacle, which must be nose and paw-proof and must not contain any hay, straw or peat moss litter.
2. The animal/s must be consigned as manifested freight and landed at one of the approved airports of entry viz. Dublin, Cork or Shannon Airports, but animals landed at Cork or Shannon must then be transhipped by air to Dublin
3. The animal/s shall be moved from Dublin Airport by Kelly Couriers to the place of detention specified in the licence.
4. The animal/s shall not be removed from the receptacle pending arrival at the place of detention or be allowed to pass into the custody of the owner.
5. Prior to the landing of the animal/s the person in charge must produce the licence to the proper Officer of Customs and Excise, and also at any time on demand for inspection by an Officer of the Department or a member of the Garda Síochána.
6. All quarantine and vaccination costs shall be borne by the owner.
7. The Department of Agriculture and Food will not be responsible for any expenses incurred with the landing, transport or detention of the animal/s or for any injury to or illness which may befall the animal(s).

I, the undersigned, having received the Department of Agriculture and Food's letter outlining conditions of importation hereby apply for a licence to land the dog(s) and/or cat(s) referred to in this application. I declare that the animal(s) is/are my property.

I declare also that to the best of my knowledge and belief all the particulars given are correct, and I understand the conditions under which the licence may be granted and I undertake that they will be observed.

**Applicant's Signature:** \_\_\_\_\_

**Applicant's Address:** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_ *(if applicable)*

**Contact person in Ireland if applicable**

Name: \_\_\_\_\_ *(please print)*

Address: \_\_\_\_\_

\_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_ *(if applicable)*

**THE COMPLETED FORMS A & B SHOULD BE SENT TO:**

**CAROLINE BERMINGHAM, DEPARTMENT OF AGRICULTURE AND FOOD (ANIMAL HEALTH & WELFARE DIVISION), 6 EAST, KILDARE STREET, DUBLIN 2.**

**FORM B**

**IMPORTATION OF DOGS AND CATS**

**DECLARATION BY OWNER**

(To be made before a Magistrate, Notary Public or Commissioner for Oaths)

I \_\_\_\_\_ (Name in full – *please print*)  
of \_\_\_\_\_ (Address)

being the owner of the animal(s) described in the schedule hereunder, do solemnly and sincerely declare that to the best of my knowledge and belief, the said animal(s) has/have not within the past six months been in direct or indirect contact with any animal affected with any disease.

And I make this solemn declaration conscientiously believing the same to be true.

**Signature of Owner:** \_\_\_\_\_

Declared and Subscribed before me at \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_.

**Signature of Magistrate/Notary Public/  
Commissioner for Oaths:**

\_\_\_\_\_

**Official Stamp of  
Magistrate/Notary  
Public/Commissioner  
for Oaths**

**SCHEDULE** (all columns must be completed)

Type of animal (Dog/Cat)	Breed	Full description, stating colour and distinctive marks	Sex	Age	Name and Address of Importer

**HEALTH CERTIFICATE**

I \_\_\_\_\_ (*name in block capitals*) of \_\_\_\_\_ (*address*) being a duly qualified veterinarian, hereby certify that I have examined the animal(s) referred to in the foregoing declaration and found it/them to be in good health and free from all infectious and contagious diseases and further, that having made due enquiry in respect of the said declaration, I have no reason to doubt its correctness.

**Signature of Veterinarian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Veterinarian's Stamp**

***Please complete if Private Quarantine has been applied for:***

Type of Rabies Vaccine \_\_\_\_\_ Batch Number \_\_\_\_\_ Expiry date \_\_\_\_\_

Manufacturer \_\_\_\_\_ Date of vaccination \_\_\_\_\_