# 狂犬病予防法及び家畜伝染病予防法に基づく犬の輸出検査申請

APPLICATION FOR EXPORT INSPECTION OF DOG
UNDER THE RABIES PREVENTION LAW AND THE DOMESTIC ANIMAL INFECTIOUS DISEASES CONTROL LAW

JJJJJJJJJ1JJJE
Year Month Day

XXXXXXXXX1XXE

申請者住所氏名及び連絡先
Name and address of applicant _____ 署名 (Signature)

氏名 Name : XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXXE

住所 Address : XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXE

電話番号 Telephone : XXXXXXXXX1XXXXXXXXXE

動物検疫所長 殿
To the chief of Animal Quarantine Service
下記の動物の輸出検査を申請いたします。
I hereby apply for the export quarantine inspection of the undermentioned animal(s).

| | | | |
|---|---|---|---|
| 申請番号 / Application No. | XXXXXXXXX1XXE | | |
| 動物の種類 / Species of animal(s) | XXXXXXXXXE | 頭数 / Quantity | NNE |
| 名称 / Name of animal(s) | XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXXE | | |
| 品種 / Breed | XXXXXXXXX1XXXXXXXXX2XXXXXXXXXE | 毛色 / Color | JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJE |
| 性別 / Sex | XXXXXE | 用途 / Use | XXXXXXXXX1XXXXXXXXXE |
| 生年月日（年齢）<br>Date of birth(Age) | XXXXXXXXXE<br>XXXXXXXXX1XXXXXXXXX2XE | 仕向国名<br>Country of destination | XXXXXXXXX1XXXXXXXXX2XXXXXXXXXE |
| 体長 / Length NNE cm | 体高 / Height NNE cm | 体重 / Weight NNE kg | |
| 搭載年月日及び搭載地<br>Date and place of embarkation | XXXXXXXXXE<br>XXXXXXXXX1XXXXXXXXXE | 搭載船舶（航空機）名<br>Name of vessel (or flight No.) | XXXXXXXXX1XXXXXXXXX2<br>XXXXXXXXX3XXXXE |
| 荷送人住所氏名<br>Name and address of consignor | XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXX<br>XXXXX9XXXXXXXXX0XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXE<br>XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXXE | | |
| 荷受人住所氏名<br>Name and address of consignee | XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXX<br>XXXXX9XXXXXXXXX0XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXE<br>XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXXE | | |
| 飼養場所（購入場所）<br>Name of keeping place (or purchase) | JJJJJJJJJ1JJJJJJJJJE | 輸送形態<br>cargo or hand luggage<br>AWB No. | XXXXXXXXX1XE<br>XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXE |
| 購入年月日<br>Date of purchase (year/month/day) | XXXXXXXXXE | 帰国予定年月日<br>Scheduled date of re-entry to Japan(year/month/day) | XXXXXXE |
| 個体識別方法（マイクロチップ等）<br>Means for identification(e.g.microchip) | XXXXXXXXE | 個体識別番号/マーク<br>Identification number/Mark | XXXXXXXXX1XXXXXXXXXE |
| 標識年月日<br>Date of identification (year/month/day) | XXXXXXXXXE | 標識部位<br>Location of identification | XXXXXXXE |
| マイクロチップ（リーダー）の種類<br>Type of microchip (reader) | XXXXXXXXXE | | |

| 狂犬病予防接種<br>Rabies vaccination | 接種年月日<br>Date of vaccination | 有効期限<br>Date of expiry | 予防液の種類<br>Kind of vaccine | 予防液の製品名及び製造会社<br>Name of product and manufacturer |
|---|---|---|---|---|
| | XXXXXXXXXE | XXXXXXXXXE | XXXXXXXXX1XXXXE | XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXXE |
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| 狂犬病抗体検査<br>Rabies serological test | 血液採取年月日 / Date of blood sampling XXXXXXXXXE | 抗体価 / Antibody titer XXXXXXXXX1XXXXXE |
|---|---|---|
| | 検査機関名及び住所 / Name of address of the designated laboratory<br>XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXXXXXXX9XXXX<br>XXXXXE<br>XXXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXXXXXXX9XXXX<br>XXXXXE | |

| その他の予防接種<br>Other vaccination | 接種年月日<br>Date of vaccination | 有効期限<br>Date of expiry | 予防液の種類<br>Kind of vaccine | 予防液の製品名及び製造会社<br>Name of product and manufacturer |
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備考
Remarks

Re-entry to Japan : XXE

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