



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

Section A: Official Government Veterinarian

1. Name: _____
2. Competent authority of the exporting country: _____

3. Address of the competent authority:
Street address (PO box not accepted): _____

Suburb/Town/City: _____ State / province: _____
Zip / Postcode: _____ Country: GREECE

Section B: Animal identification details

4. Name of animal: _____
5. Date of birth: _____
6. Sex: ☐ Male ☐ Neutered male ☐ Female ☐ Neutered female
7. Description (breed, colour): _____
8. Microchip number (must be 10 or 15 digits):

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Second microchip number (if required)

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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? (Please Circle) **YES / NO**
Note: If answered NO, do not complete this form.



Section D: Rabies neutralising antibody titre test results

15. Did a testing laboratory recognised by the competent authority in the country of export issue the RNATT? (Please Circle) YES / NO

Note: If answered NO, do not complete this form.

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: _____

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? (Please Circle) YES / NO

Note: If answered NO, do not complete this form.

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? (Please Circle) YES / NO

Note: If answered NO, do not complete this form.

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

(Please Circle) **YES** / **NO**

Note: If answered NO, do not complete this form.

27. Name of person completing RNATT declaration: _____

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.

<hr/> <i>Signature of Official Government Veterinarian</i> <i>Stamp of Official Government Veterinarian</i>	Country of export: GREECE
	Competent Authority:
	Date certificate completed: (day/month/year)
	Name:
	Address:
	Phone number:
	Email contact:

* 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