

APPLICATION FOR IMPORT INSPECTION OF DOGS
UNDER THE RABIES PREVENTION LAW AND THE DOMESTIC ANIMAL INFECTIOUS DISEASES CONTROL LAW

Year Month Day



Name and address of applicant

署名 (Signature)

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To the chief of Animal Quarantine Service

I hereby apply for the import quarantine inspection of the undermentioned animal(s).

申請番号 / Application No.		XXXXXXXXXXE		共通管理番号		XXXXXXXXXXE											
届出受理番号 / Approval No.								XXXXXXXXXXE									
動物の種類 / Species of animal(s)				JJJJJJJJJE XXXXXXXXXXE		頭数 / Quantity		NNE									
名称 / Name of animal(s)								JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJ3JJJJJJJJJE									
個体識別方法 (マイクロチップ等) Means for identification(e.g.microchip)				JJJJJJJJJ1JJJJJJJJJE XXXXXXXXXXE		個体識別番号/マーク Identification number/Mark		XXXXXXXXXX1XXXXXXXXXXE									
標識年月日 Date of identification(year/month/day)			XXXXXXXXXXE		標識部位 Location of identification		JJJJJJJJJE XXXXXXXXXXE		マイクロチップ (リーダー) の種類 Type of microchip(reader)		XXXXXXXXXXE						
体長 / Length		NNE		cm		体高 / Height		NNE		cm		体重 / Weight		NNE		kg	
品種 Breed		JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJJJE XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXXE				毛色 Color		JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJJJE									
性別 Sex		JJJJJJJJJ1JE XXXXXE				用途 Use		JJJJJJJJJ1JJJJJJJJJJJE XXXXXXXXXX1XXXXXXXXXXE									
生年月日 (年齢) Date of birth(Age)		XXXXXXXXXX1XE		JJJJJJJJJ1JJJJJJJE XXXXXXXXXX1XXXXXXXXXX2XE		仕出国名 Country of export		JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJJJE XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXXE									
搭載年月日及び搭載地 Date and place of embarkation		XXXXXXXXXXE		XXXXXXXXXX1XXXXXXXXXXE		搭載船舶 (航空機) 名 Name of vessel (or flight No.)		JJJJJJJJJ1JJJJJJJJJJJ2 JJJJJJJJJ3JJJJJE									
到着年月日及び到着港 Date and place of arrival		XXXXXXXXXXE JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJ3JJJJJJJJJJJE XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXXE				輸送形態 cargo or hand luggage		JJJJJJJJJE XXXXXXXXXX1XE									
						AWB/BL番号 AWB/BL No.		XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXXE									
荷送人住所氏名 Name and address of consignor		XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXX6XXXXXXXXXX7XXXXXXXXXX8 XXXXXXXXXX9XXXXXXXXXX0XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXE XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXX6XXXXXXXXXXE															
荷受人住所氏名 Name and address of consignee		XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXX6XXXXXXXXXX7XXXXXXXXXX8 XXXXXXXXXX9XXXXXXXXXX0XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXXE XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXX6XXXXXXXXXXE															
仕出地 (飼養施設名称及び住所) Name and address of the facility in which the animal(s) was/were kept								XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXX6XXXXXXXXXX7XXXXXXXXXX8XXXXXXXXXX9XXXXXXXXXXE XXXXXXXXXX1XXXXXXXXXX2XXXXXXXXXX3XXXXXXXXXX4XXXXXXXXXX5XXXXXXXXXX6XXXXXXXXXX7XXXXXXXXXX8XXXXXXXXXX9XXXXXXXXXXE									
仕向地 (名称及び住所) Name and address of destination		JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJ3JJJJJJJJJJ4JJJJJJJJJ5JJJJJJJJJ6JJJJJJJJJ7JJJJJJJJJJ8 JJJJJJJJJ9JJJJJJJJJJ0JJJJJJJJJ1JJJJJJJJJJJE						JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJ3JJJJJJJJJJ4JJJJJJJJJ5JJJJJJJJJ6JJJJJJJJJJJE									
過去1年以内の訪問国及びその年月日 Countries visited in the past 12 months and the date of visits								JJJJJJJJJ1JJJJJJJJJ2JJJJJJJJJ3JJJJJJJJJJ4JJJJJJJJJ5JJJJJJJJJ6JJJJJJJJJ7JJJJJJJJJ8JJJJJJJJJ9JJJJJJJJJJ0JJJJJE									

狂犬病予防接種 Rabies vaccination	接種年月日 Date of vaccination (year/month/day)	有効期限 Date of expiry (year/month/day)	予防液の種類 Kind of vaccine	予防液の製品名及び製造会社 Name of product and manufacturer
	XXXXXXXXXE	XXXXXXXXXE	JJJJJJJJE XXXXXXXX1XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
	XXXXXXXXXE	XXXXXXXXXE	JJJJJJJJE XXXXXXXX1XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
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	XXXXXXXXXE	XXXXXXXXXE	JJJJJJJJE XXXXXXXX1XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
狂犬病抗体検査 Rabies serological test	血液採取年月日 Date of blood sampling(year/month/day)		XXXXXXXX1XXXXE	抗体価 Antibody titer
	JJJJJJJJ1JE XXXXXXXX1XXXXE			
	検査機関名及び住所 Name and address of the designated laboratory XXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXXXXXXX9XXXXXXXXXE XXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXXXXXXX9XXXXXXXXXE			
	血液採取年月日 Date of blood sampling(year/month/day)		XXXXXXXX1XXXXE	抗体価 Antibody titer
その他の予防接種 Other vaccination	接種年月日 Date of vaccination (year/month/day)	有効期限 Date of expiry (year/month/day)	予防液の種類 Kind of vaccine	予防液の製品名及び製造会社 Name of product and manufacturer
	XXXXXXXXXE	XXXXXXXXXE	XXXXXXXXX1XXXXXXXXX2XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
	XXXXXXXXXE	XXXXXXXXXE	XXXXXXXXX1XXXXXXXXX2XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
	XXXXXXXXXE	XXXXXXXXXE	XXXXXXXXX1XXXXXXXXX2XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
	XXXXXXXXXE	XXXXXXXXXE	XXXXXXXXX1XXXXXXXXX2XXXXE	JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJJE
備考 Remarks	Has the animal been kept in the designated regions for at least 180 days or since birth? XXXXXE Has blood sampling for serological test been performed in Japan? XXXXXXXX1XXXXXXXXX2XXXXXE XXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXXXXXXX9XXXXXXXXXE XXXXXXXX1XXXXXXXXX2XXXXXXXXX3XXXXXXXXX4XXXXXXXXX5XXXXXXXXX6XXXXXXXXX7XXXXXXXXX8XXXXXXXXX9XXXXXXXXXE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE JJJJJJJJ1JJJJJJJJ2JJJJJJJJ3JJJJJJJJ4JJJJJJJJ5JJJJJJJJ6JJJJJJJJ7JJJJJJJJ8JJJJJJJJ9JJJJJJJJJE			
申請番号 / Application No. XXXXXXXX1XXE				