



Notification of horse transport

Date of transport and Departure time: _____

Estimated travel time: _____ hours

Date of return trip, if applicable _____

Name	life number animal passport	number microchip

1. Certificate requested for

Trail ride Horse tournaments Sale Other: _____

2. Consignor

Name: _____

Adress: _____

Phone: _____

3. Place of loading

Name: _____

Adress: _____

Phone: _____

Please note reverse side!



4. Consignee

Name: _____

Adress: _____

Phone: _____

5. Place of destination

Name: _____

Adress: _____

Phone: _____

6. Carrier commercial privat

Name: _____

Adresse: _____

Phone: _____

7. License plate

Transport vehicle: _____ Trailer: _____

8. Driver

place, date

signature

Please fill out completely, and return to the following address, by e-mail or fax:

Landratsamt Rosenheim
Staatliches Veterinäramt
Am Klafferer 3
83043 Bad Aibling
Germany

e-mail: vet-631@lra-rosenheim.de
fax: +49 (0) 8031 392-96370