

# LAF HEALTH CERTIFICATE FOR EXPORT OF RESEARCH RODENTS TO CHINA

## I IDENTIFICATION OF THE ANIMALS

Identification	Species	Number	Sex	Age	Color	Strain

Total number of animals: \_\_\_\_\_

## II ORIGIN OF THE ANIMALS

a. Name and address of the consignor:

\_\_\_\_\_

b. Scheduled date of shipment and port of embarkation (if known):

\_\_\_\_\_

## III DESTINATION OF THE ANIMALS

a. Name and address of the consignee:

\_\_\_\_\_

b. Scheduled date and port of arrival (if known):

\_\_\_\_\_

## CERTIFICATION STATEMENTS

The animals have been purpose-bred, maintained and supervised at the Laboratory Animal Facility at HKUST and meet all the following:

- A. The animals are overseen by the Attending Veterinarian on a routine basis to ensure the wellbeing, feeding, hygiene, general husbandry and animal welfare are appropriate.
- B. A regular health monitoring and surveillance program is carried quarterly.
- C. LAF prevents the intrusion of wild rodents and other unwanted animals.
- D. The animals were born in this institution and have been permanently kept in captivity in this establishment.
- E. The animals do not come from, or have been in contact with, other animals either from a region or holding, where animals showed any clinical signs or suspicion of being infected with myxomatosis, tularaemia, rabbit haemorrhagic disease or other infectious and contagious diseases, including rabies, to which the species is susceptible to within the last 6 months, or from a facility which has been under quarantine or any other restrictive measures for animal health reasons.
- F. These mice are intended for laboratory use only and are specific-pathogen-free.
- G. The mice are of no commercial value and are non-infectious to humans or other animals.
- H. The mice have been examined on this date by the Attending Veterinarian as dated on this document and have been deemed free of any clinical signs associated with infectious diseases, including external parasites.

Laboratory Animal Facility (CWB) - Dr. Dawn Ngai

Name of issuing institutional and Attending Veterinarian

\_\_\_\_\_  
Signature of Attending Veterinarian

\_\_\_\_\_  
Date