THIS CERTIFICATE MUST ACCOMPANY ALL ELIGIBLE ANIMALS TO ALL MD LIVESTOCK SHOWS
THIS IS NOT AN INTERSTATE CERTIFICATE
APPROVED (CVI) IS VALID FOR SHOW SEASON

MARYLAND DEPARTMENT OF AGRICULTURE
ANIMAL HEALTH SECTION
50 HARRY S. TRUMAN PARKWAY, ANNAPOLIS, MARYLAND 21401
410-841-5810

INTRASTATE CERTIFICATE OF VETERINARY INSPECTION (CVI)

WWW.MDA.STATE.MD.US

COMPLETE WITHIN 60 DAYS OF FIRST SHOW AND SUBMIT FOR APPROVAL TO ANNAPOLIS HEADQUARTERS, FREDERICK, OAKLAND, COLLEGE PARK, CENTREVILLE, OR SALISBURY LABORATORIES

1. FIRST SHOW: NAME & DATE	2. EXHIBITOR'S NAME	3. COMPLETE MAILING ADDRESS	4. COUNTY	5. TELEPHONE #

6. SCRAPIE PREMISE ID NUMBER:	7. NATIONAL ANIMAL ID SYSTEM (NAIS): PREMISES ID NUMBER (IF AVAILABLE)

8. EAR TAG OR TATTOO (INDIVIDUAL SCRAPIE ID)	9. REGISTERED NAME OR REGISTERED #	10. SPECIES	11. DATE OF BIRTH	12. SEX	13. BREED	14. THIS COLUMN TO BE COMPLETED BY VETERINARIAN TO LIST ANY FURTHER TESTING AND/OR TREATMENT & ANY CONDITIONS IN THE LAST 30 DAYS.

15.

VACCINATION HISTORY	CHECK	DATE
RESPIRATORY COMPLEX	☐	
BVD	☐	
LEPTOSPIROSIS	☐	
RABIES	☐	

OTHER VACCINATIONS: NAME & DATE

16. TO BE COMPLETED BY VETERINARIAN – I CERTIFY I HAVE EXAMINED THE ANIMALS DESCRIBED ABOVE AND FOUND THEM FREE FROM DISEASE INCLUDING CLINICAL SIGNS OF CONTAGIOUS AND INFECTIOUS DISEASE; FOR SHEEP AND GOATS THE EXAMINATION INCLUDES THE ENTIRE FLOCK. THESE ANIMALS MEET THE HEALTH REQUIREMENTS FOR EXHIBITION AT MARYLAND FAIRS AND SHOWS.

VETERINARIAN NAME (PRINTED)

ADDRESS

VETERINARIAN'S SIGNATURE TELEPHONE # DATE

FORM MDA-E-16 (REV 1-10-08)

Distribution: WHITE: MDA CANARY: OWNER