



CHARLES H. BRONSON
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Animal Industry
Bureau of Animal Disease Control

**APPLICATION FOR
EQUINE INTERSTATE PASSPORT CARD**
*** Not valid for change of ownership**

585.145, 585.671, Florida Statutes
5C-3.003, Florida Administrative Code

Forward application and documents
with remittance fee of \$15.00 for first
equine; \$5.00 each additional equine
on this application, made payable to:
Florida Department of Agriculture
& Consumer Services
ATTN: Dr. John Irby
605 East Main St.
Bartow, Florida 33830
863-519-8507 Fax: 519-8469
www.doacs.state.fl.us/ai/

Note: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, F.S.

OWNER/AGENT	DATE
MAILING ADDRESS	COUNTY
CITY	DAYTIME TELEPHONE NUMBER
STATE, ZIP CODE	SIGNATURE

In accordance with the rules of the State of Florida, Section 5C-3.003, Florida Administrative Code, I hereby request Equine Event Extension(s) on the following Official Certificate(s) of Veterinary Inspection:

Official Certificate of Veterinary Inspection	Number:	
Number:		Number:
Number:		Number:
NAME OF HORSE	LABORATORY EIA ACCESSION NUMBER	
NAME OF HORSE	LABORATORY EIA ACCESSION NUMBER	
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DOCUMENTS TO ACCOMPANY FEE: <input type="checkbox"/> A completed application <input type="checkbox"/> Original(s) or legible photocopy(ies) of Official Certificate(s) of Veterinary Inspection(s)	<input type="checkbox"/> The original(s) or legible photocopy(ies) of the Equine Infectious Anemia test record(s) (VS Form 10-11) or color copy of electronic EIA test with digital images. <input type="checkbox"/> digital image of L side, R side and front of horse(s) on CD
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42090201000/A2 001246 \$15.00/\$5.00