

SAMPLE OF ANTI RABIES VACCINATION CERTIFICATE

(To be printed on the Letter Head of Regd. Veterinary Doctor)

ANTI RABIES VACCINATION CERTIFICATE FOR PET DOG REGISTRATION

Photo of the Dog along with owner
and duly attested by the attending
Veterinary Doctor.

1	Name of Pet Dog Owner	
2	Address	
3	Mobile No. of Pet Dog Owner	
4	Name of Pet Dog	
5	Gender	
6	Breed	
7	Colour	
8	Identification mark (if any)	
9	Date of Anti Rabies Vaccination	
10	Next due date of ARV	
11	Council Registration No.	

I, Dr. _____ certify that the Dog/Bitch/Pup having details as mentioned above has been vaccinated against Rabies by me.

Signature & Stamp of the attending Vet