

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

EquinePrograms@FreshFromFlorida.com

Remit \$15.00 for first equine; \$5.00 each additional equine on this application Application Fee Online at: www.FreshFromFlorida.com

- or -

Check or Money Order Payable to FDACS and remit to: Equine Programs Office 407 South Calhoun St. Room 329 Tallahassee, Florida 32399-0800

www.FreshFromFlorida.com/ai

Note: All documents and attachments submitted with th	nis 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 50 Extension(s) on the following Official Certificate(s) of Veterinar	C-3.003, Florida Administrative Code, I hereby request Equine Event by Inspection:
Official Certificate of Veterinary Inspection	Number 1
Number 2	Number 3
Number 4	Number 5
NAME OF HORSE 1	LABORATORY EIA ACCESSION NUMBER 1
NAME OF HORSE 2	LABORATORY EIA ACCESSION NUMBER 2
NAME OF HORSE 3	LABORATORY EIA ACCESSION NUMBER 3
NAME OF HORSE 4	LABORATORY EIA ACCESSION NUMBER 4
NAME OF HORSE 5	LABORATORY EIA ACCESSION NUMBER 5
Documents To Accompany Fee	
A completed application.	
Original(s) or legible photocopy(ies) of Official Certificate(s) of Veterinary Inspection(s).	ORG CODE: 42 09 02 01 000
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.	OE: A2 OBJECT CODE: 001246 Fee: \$15.00/\$5.00
Digital image of L side, R side and front of horse(s) on CD.	