

New York State Department of Agriculture and Markets

Veterinary Certification of Unfitness of Dog or Cat For Purchase

Date of Exam: _____

Owner of Dog or Cat: _____

Owner Address: _____

Owner Telephone Number: (____) _____

Animal Species: Canine _____ Feline _____

Breed: _____

Age: _____ Sex: _____ Color: _____

Diagnosis: _____

Recommended Treatment: _____

Estimate or Actual Cost of Treatment: _____

This is to certify pursuant to Article 35-D of the General Business Law of the State of New York, that I am a veterinarian duly licensed by the State of _____, that I have examined the above animal as set forth herein and that I find that said animal is unfit for purchase due to: (check one)

_____ illness

_____ congenital malformation which adversely affects the health of the animal

_____ the presence of symptoms of a contagious or infectious disease

Signature of Veterinarian _____ Date: _____

Name of Veterinarian (printed): _____ Lic #: _____

Address of Veterinarian: _____

Phone Number of Veterinarian: (____) _____