EQUINE ONLY – CALIFORNIA ENTRY DOCUMENT

EQUINE ONLY – CALIFORNIA ENTRY DOCUMENT			Date		
Origin State		Vehicle License Plate		**Trailer License Plate**	
Owner/Receiver Name					
Physical Destination Address					
Owner Phone Number		**Health Certificate Date and Number #**		**Coggins Date**	

Head Count		Type of Equine	☐Horse ☐Mule ☐Burros ☐Donkey ☐Zebra
		Purpose	☐Exhibition/ Show/Race ☐Breeding ☐Companion ☐Other- Specify_____

NOTICE:
Bolded fields above will be verified by Border Protection Station inspector.
You must provide Health Certificate and Coggins to inspector for verification. (Electronic or paper copy of the forms are acceptable.)
If this form is incomplete, you will be required to provide the information to the inspector.

Official Business Use Only	Reviewed and Verified ☐: Trailer License Plate ☐Health Certificate ☐Coggins Test ☐ Hot Sheet Needed Situation Code _____ Verified by _____ Entered into Database By_____