



Department
for Environment
Food & Rural Affairs

Animal Welfare Act 2006, section 12

The Microchipping of Dogs (England) Regulations 2015,
regulation 3(2)

Certificate of Exemption

To be completed by the veterinary surgeon signing below-

1. I (INSERT NAME), confirm that I have examined the dog and am satisfied that it should not be implanted with a microchip for the following health reason(s):

.....
.....
.....

and for the following length of time:

- a) for the remaining life of the dog* or,
- b) until (*insert date dd/mm/yyyy*)* (*delete as appropriate)

The description of the dog is as follows (include breed/cross-breed of dog, age, size, colour of coat, any distinguishing features):

.....
.....
.....
.....

Signature of Veterinary Surgeon:

Name (in capitals):

MRCVS number:

Address of Veterinary Surgeon's Practice:

Statement to be completed by the keeper of the dog or a person authorised by the keeper to represent him-

2. I, (INSERT NAME), confirm that:
I am [the keeper of the dog/authorised to represent the keeper of the dog*], (**delete whichever is inapplicable*) and I understand that this certificate is only valid for the period stated above.

Signature of keeper of the dog or of the person authorised to represent him:
.....

Name (in capitals):

Address: