



BALKAN RELOCATIONS D.O.O.

Adresa: Dr.Ivana Ribara 53, 11070 Novi Beograd

Tel/fax: +381 11 2276 599, +381 60 0812345, +381 60 08 543221

Email:balkanrelocations@gmail.com Web site: www.balkanrelocations.com

PET RELO FORM

[Insert Date]

Please fill in the blank (MUST fill in for * mark)	
Customer name*	
Address*	
Contact number/e-mail*	Place to bill*
Exporting Country [city] *	Port of export * Port of entry *
Preferred transportation service*	
WITH OWNER (as checked –in baggage) <input type="checkbox"/> WITHOUT OWNER / CARGO <input type="checkbox"/>	
Collection from residence* <input type="checkbox"/>	If YES, pick up address*
Deliver to new residence* <input type="checkbox"/>	If YES, pick up address*
ANIMAL INFORMATION	Person Responsible:
Animal*	 D A b
Breed*/Name	
Gender	
Age/Birthdate/Year	
Fur color/Weight* [Kg]	

A*	Length from nose to the root of tail	cm
B*	Length from ground to elbow joint	cm
C*	Width across shoulders	cm
D*	Height from ground to top of head	cm



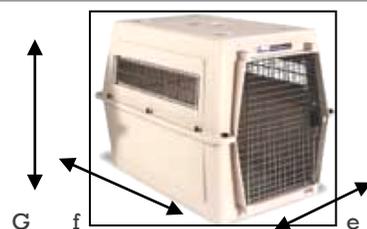
C \longleftrightarrow

Crate dimension* [frame]	<u>E</u>	<u>F</u>	<u>G</u>	cm
	Length	Width	Height	

ID Number (chip/transponder)

ID date	
Rabies vaccination date	
Other vaccination type/date	

Blood Sampling Date



G f e

SHIPPING INFORMATION

****IN 24 HOURS CLOCK**

Expected boarding date for pet	D		Flight		@	HRS
Do you request Balkan Relo to apply for Import permit number to MAFF?						
YES <input type="checkbox"/>						
NO <input type="checkbox"/>						

Is Kenneling at Balkan Relocations required upon arrival

Other Information:

I confirm that I have read and understood Balkan Relocations Policies.

Person Responsible:

Deadline:

Thank you for your cooperation!!!