

Columbia Veterinary Hospital

4330 River Trail Way The Dalles, OR 97058

541-296-5059 cvhthedalles@gmail.com

Letter of Acclimation for Airline Transportation

<i>Shipper/Owner</i>	
Name:	_____
Address:	_____
City:	_____
State:	_____ Zip Code: _____
Phone Number:	_____
Alt. Phone Number:	_____

<i>Consignee/Owner</i>	
Name:	_____
Address:	_____
City:	_____
State:	_____ Zip Code: _____
Phone Number:	_____
Alt. Phone Number:	_____

Animal Data:

1.) _____
Species: _____ Breed: _____ Sex: _____ Age: _____
Weight: _____ Color: _____ Microchip #: _____

2.) _____
Species: _____ Breed: _____ Sex: _____ Age: _____
Weight: _____ Color: _____ Microchip #: _____

3.) _____
Species: _____ Breed: _____ Sex: _____ Age: _____
Weight: _____ Color: _____ Microchip #: _____

Flight Info: _____

The animal(s) in this shipment appear healthy for transport but need(s) to be maintained at a range of ambient temperatures (in Fahrenheit) to which animal(s) has/have been acclimated, as determined in consultation with owner/authorized agent to be lower than 45 degrees for no longer than 45 minutes and may not exceed 85 degrees for no longer than 45 minutes.

Veterinarian Signature _____ Date _____