



NICOLE "NIKKI" FRIED
COMMISSIONER

Department of Agriculture and Consumer Services
Division of Animal Industry
Bureau of Animal Disease Control

**CONTAGIOUS EQUINE METRITIS
OWNER'S AGREEMENT FOR QUARANTINE
and APPLICATION FOR IMPORT**

§ 585.002, Florida Statutes
5C-22, Florida Administrative Code
9 CFR § 93

Remit \$1,250.00/\$750.00 or combination thereof, (See PART I, 3.) Fee Online at: www.FDACS.gov

- or -

Check or Money Order Payable to FDACS and remit to:
FDACS
P.O. Box 6710
Tallahassee, FL 32314-6710

Contact:
Equine Programs Office
850/410-0900; Fax: 410-0919
<https://www.fdac.gov/Divisions-Offices/Animal-Industry>

PART I: Owner's Agreement

I hereby request permission from the Florida Department of Agriculture and Consumer Services to import the following horse(s) into the State of Florida in compliance with the provisions of Chapter 5C-22, FAC, Contagious Equine Metritis, and 9 CFR 93.301(e)(3)(4)(5).

FOR INDIVIDUAL LISTING OF HORSES, SEE ATTACHMENT I

The horse originated from: _____
(Country of Origin)

and will be quarantined at: _____
(Approved Quarantine Facility)

In requesting this permission, I **certify** that I have read the requirements of Chapter 5C-22, FAC, and 9 CFR 93.301(e)(3)(4)(5), and agree to comply with all provisions, including but not limited, to the following:

1. The horse(s) may not be removed from the quarantine facility until the Release of Quarantine, FDACS-09076, has been signed by the State Veterinarian and the USDA Area Veterinarian in Charge.
2. The horse(s) will qualify for release from quarantine if all cultures and tests specified in 5C-22, FAC, and 9 CFR 93.301(e)(3)(4)(5) are negative for CEM; including all cultures and tests on the test mares used for stallion testing. Owners of stallions which are stabled in Florida following release from an Approved CEM Quarantine Facility shall be required to provide the Department with results of a CF test for CEM no less than 21 days post breeding on the first three mares bred.
3. The owner/agent will pay \$1,250 for each horse (\$750 for each additional horse) imported by the same owner, at the same time, and to the same facility. All fees are to be paid by check or money order and made payable to the Florida Department of Agriculture and Consumer Services.
4. If a stallion is imported, the owner/agent is responsible for obtaining test mares which meet the criteria for test mares as prescribed by 9 CFR 93.301(e)(3)(4).
5. If a horse fails to qualify for release from quarantine within eighteen (18) months of initiation of testing, culturing and treatment, the horse 1.) may be moved directly to slaughter under official permit, or 2.) may be humanely euthanized and the carcass destroyed under supervision of the Department as directed in Chapter 5C.22.09, FAC.

Org. Code: 42090201000
EO: A2
Object Code: 001196 \$1,250.00/\$750.00

CONTAGIOUS EQUINE METRITIS OWNER'S AGREEMENT FOR QUARANTINE (Continued)

- 6. The attending veterinarian must be licensed in the State of Florida and must be accredited by the United States Department of Agriculture to perform federal regulatory activities in the State of Florida. The attending veterinarian must perform all required examinations, testing, treatments and collections of material for culture as specified in 9 CFR 93.301 (e) (3)(4)(5).
- 7. A state or federally employed regulatory veterinarian will directly supervise the professional services of the attending veterinarian.

(Owner/Agent, Printed)

(Address/Telephone Number)

(Owner's/Agents Signature)

PART II: Attending Veterinarian

I will comply with all requirements as set forth in Chapter 5C-22, FAC, and 9 CFR 93.301 (3)(4) (5). I understand that I must be licensed in the State of Florida and accredited by USDA to perform regulatory activities in Florida. I also understand that my professional services will be supervised by a Division of Animal Industry representative. The horse may not be removed from quarantine until a Release from Quarantine, FDACS-09076, is signed by the State Veterinarian and the USDA Area Veterinarian in Charge.

(Attending Veterinarian, Printed)

(Florida License Number)

(Signature of Attending Veterinarian)

(Date)

(Division of Animal Industry Representative, Printed)

(Title)

(Signature of Division Representative)

(Date)

PERMIT TO IMPORT

The above listed owner/agent is hereby permitted to import the horses identified on Attachment I into the State of Florida in compliance with the provisions of Chapter 5C-22, FAC, and 9 CFR 93.301 (e) (3), (4) & (5).

APPROVED

(State Veterinarian, Printed) _____

(Signature of State Veterinarian) _____

Date

