

Substitutive declaration of certification

(art. 46 of D.P.R. 445, December 28th 2000)

| I, Surname | Name |
|---------------------|---|
| ID/Passaporto Num | nber |
| Place of Birth | Date of Birth |
| Address | Street Number |
| Postal Code | Place |
| Teleph | one Number |
| being aware that fa | alse declarations could be punished according to the Italian law (art.46 of DPR 445, December 28th 2000) |
| | DECLARE |
| 1)To be owner of t | the dog/s with the name/s |
| 2) The dog is regul | arly registrated in the Canine registry of the |
| City(place) | |
| 3) The dog has rec | eived the obligated vaccines requested by Law (Echinococcus, distemper, canine hepatitis, Leptospirosis). |
| Place, | Signature |

According to Art. 10 of the Italian Law (675/1996 and following), I give my consent so that my personal data can be managed as indicated.

