

致: 愛護動物協會賽馬會百周年中心 (青衣中心)

To: SPCA Jockey Club Centennial Centre
(Tsing Yi Centre)

入住愛護動物協會賽馬會百周年中心 (青衣中心) 檢疫設施的聲明及承諾書
DECLARATION AND UNDERTAKING
FOR ADMISSION TO QUARANTINE CATTERY IN SPCA TSING YI CENTRE

就本人申請從第三 A 及第三 B 組國家/地區進口*狗隻 / 貓隻 的特別許可證或進口許可證, 本人 __
(姓名), * 香港身份證號碼 _____ / 護照號碼 _____,
是 寵 物 (動物種類: *狗隻 / 貓 隻, 品種: _____,
晶片號碼: _____) 的 *主人 / 授權人, 本
人謹此作出以下聲明及承諾:

Further to my application for a Special Permit/ Import Permit for the importation of my * dog / cat from a Group III A/B country/place, I, _____ (Name), * Hong Kong Identity Card / Passport No. _____, the *owner / authorised person of the pet (Species: * dog / cat, Breed: _____, Microchip no.: _____), hereby make the following declaration and undertaking:

甲部: 動物健康狀況聲明[#]

Section A: Declaration on the health condition of the animal[#]

☐ 本人聲明就本人所知, 本人的寵物健康狀況良好, 沒有任何已存在疾病; 或
I declare that to the best of my knowledge, my animal is healthy and does not have any pre-existing medical problems; OR

☐ 本人聲明本人的寵物有以下疾病/健康問題, 但現時不需藥物治療; 或
I declare that my animal has the following medical problem(s), but no medication is required at present; OR

☐ 本人聲明本人的寵物有以下疾病/健康問題, 並需要接受以下藥物治療:
I declare that my animal has the following medical problem(s) and requires the following medication(s):

乙部：在隔離期間為寵物提供獸醫護理承諾**Section B: Undertaking on provision of veterinary care for the animal during quarantine**

本人明白並接受以下有關本人的寵物在愛護動物協會賽馬會百周年中心（青衣中心）檢疫設施隔離期間，就該動物的獸醫護理的安排及責任：

I acknowledge and accept the following arrangements and obligations regarding the veterinary care of my animal during the quarantine period at SPCA Jockey Club Centennial Centre (Tsing Yi Centre) quarantine facility:

1. 隔離期間，愛協青衣中心職員將定期檢查動物，提供基本餵食，籠舍清潔，但不會主動提供任何獸醫治療及需要直接接觸動物的護理服務，例如塗上及施用藥物。動物主人/授權人須負責安排及預約該動物在整個隔離期間的獸醫護理，並繳付一切相關費用。

Staff from SPCA Tsing Yi Centre will conduct regular checks, basic feeding and cleaning of cages for the animal during quarantine but no veterinary treatment and care services requiring direct contact with the animal, such as applying topically or administering medication, will be provided. The owner/authorised person is responsible for the provision, appointment and cost of veterinary care of the animal during the entire period of quarantine at SPCA Tsing Yi Centre.

2. 隔離期間，如愛協青衣中心職員認為該動物的健康狀況需要接受獸醫診治，中心職員會立即聯絡動物主人/授權人。該動物會首先在愛協接受其獸醫檢查及治療，或該動物主人/授權人可在官方護送下親身帶同該動物到其他註冊私家獸醫或獸醫診所為該動物進行診治。

In case of any concern that the animal's health condition may require veterinary attention, the owner/authorised person will be contacted immediately to make the necessary arrangements. The animal will be first examined and treated by our SPCA veterinary surgeon. If needed, the owner/authorised person may elect to take the animal to a private registered veterinary surgeon/veterinary clinic for further treatment under SPCA's staff escort.

3. 在動物入住愛協青衣中心時，愛協青衣中心為其動物指定的獸醫診所，以便當動物的健康出現緊急情況而動物管理中心職員無法與動物主人/授權人聯絡時，能及時安排該動物接受適當的獸醫治療。動物主人/授權人亦可指定最少一位註冊私家獸醫[✧]或一間獸醫診所[✧]，如愛協青衣中心未能為該動物提供治療，中心人員有權直接將動物送往指定的註冊私家獸醫或獸醫診所為動物進行診治。動物主人/授權人必須支付一切有關費用當中包括醫療，交通，藥費等。

Upon admission at SPCA Tsing Yi Centre, SPCA Tsing Yi Centre will be the designated veterinary clinic to provide prompt veterinary care if the animal's health condition appears to be urgent and staff of SPCA Tsing Yi Centre cannot contact the owner/authorised person. The owner/authorised person can also nominate at least one private registered veterinary surgeon[✧] or veterinary clinic[✧] if SPCA Tsing Yi Centre is unable to provide treatment for the animal, our staff will have the authority to take the animal to the nominated private registered veterinary surgeon/veterinary clinic directly. The owner/authorised person is responsible for all the fees incurred.

✧ 持有有效執業證明書的註冊獸醫名單可參閱：

✧ A list of registered veterinary surgeons with valid practicing certificates in Hong Kong is available at:
<https://www.vsbhk.org.hk/english/vsro/vsro.html>

✧ 獸醫診所名單：

✧ A list of veterinary clinics in Hong Kong is available at:
https://www.pets.gov.hk/english/animal_health_and_welfare/vet_clinics_list.html

4. 當動物的健康出現緊急情況時，如愛協青衣中心或動物主人/授權人指定的註冊私家獸醫或獸醫診所無法及時提供診治，基於動物福利的考慮，愛協青衣中心職員有權另行將動物送往其他愛護動物協會獸醫診所或註冊私家獸醫/獸醫診所進行治療。動物主人/授權人必須支付一切有關費用當中包括醫療、交通、藥費等。

In the event of the animal being in an emergency medical situation, and either SPCA Tsing Yi Centre or the private registered veterinary surgeon/veterinary clinic nominated by the owner/authorised person is not readily available, in the interests of animal welfare staff of SPCA Tsing Yi Centre have the authority to take the animal to another SPCA Clinic or private registered veterinary surgeon/veterinary clinic for treatment. The owner/authorised person is responsible for all the fees incurred.

5. 當動物的健康出現緊急情況時，縱使動物主人/授權人拒絕為寵物安排私家獸醫診治，愛協青衣中心職員有權為動物安排治療或送往註冊私家獸醫或獸醫診所進行治療。動物主人/授權人必須支付一切有關費用當中包括醫療、交通、藥費等。In the event of the animal being in an emergency medical situation, even if the owner/authorised person refuses to arrange veterinary treatment for the animal by a private registered veterinary surgeon/clinic, staff of SPCA Tsing Yi Centre will have the authority to take the animal to private registered veterinary surgeon/veterinary clinic or arrange for a private registered veterinary surgeon to visit the animal. The owner/authorised person is responsible for all the fees incurred.

丙部：動物主人/授權人聲明及承諾

Section C: Declaration and Undertaking of the animal owner/authorised person

本人謹此聲明 I declare that :

- ☐ 上述甲部所提供的資料正確無誤。

The information provided in Section A is correct.

- ☐ 本人已仔細閱讀並明白上述乙部本人的義務和責任，並承諾予以遵守。

I have read and fully understood my obligations and liability in Section B. I undertake to comply with the arrangements.

- ☐ 本人已仔細閱讀並明白個人資料收集聲明的內容。

I have read and fully understood the Statement of Purpose of Collection of Personal Data.

簽名Signature	:	_____
姓名Name	:	_____
香港身分證/護照編號		
HKID/Passport no.	:	_____
電話號碼Telephone no.	:	_____
電郵地址Email address	:	_____
日期Date	:	_____

個人資料收集聲明

- 你所提供的資料將用作與申請本署的特別許可證/進口許可證的有關事宜。
- 個人資料的提供純屬自願性質。若你未能提供足夠的資料，本署可能無法辦理你的申請。
- 本署可能將部分資料披露予獲授權人士。
- 本中心可能將部分資料披露予獲授權人士例如漁農自然護理署進出口科簽證及認證組。
- 除個人資料 (私隱) 條例所訂明的豁免外，你有權查閱和改正你的個人資料。

PERSONAL INFORMATION COLLECTION STATEMENT

- The Information provided by you will be used for the purposes relating to the application for Special Permit/Import Permit in this department.
- The provision of personal data is voluntary. If you do not provide sufficient information, this department may not be able to process your application.
- This Department may disclose part of the information to authorised parties.
- Subject to exemptions under the Personal Data (Privacy) Ordinance, you have a right of access and correction with respect to personal data.

* 請刪去不適用者 *Please delete as appropriate*

請在適當空格加☑號 *Please tick ☑ in the appropriate box*

^ 請提供藥物治療的施用方法(如口服、皮下注射)及施用次數 *Please provide the route (e.g. oral, subcutaneous injection) and frequency of administration*