COLORADO
Department of Agriculture
Animal Health Division

Colorado Electronic Certificate of Veterinary Inspection (eCVI) User Agreement

This document establishes an agreement in the use of the Colorado eCVI between you, a licensed accredited veterinarian in Colorado and the Colorado Department of Agriculture, Animal Health Division.
Please read through the following terms of agreement carefully. By signing this agreement, you and the veterinary clinic you represent are responsible for the following conditions. Veterinarians that do not agree to or violate these terms will not have access to the certificate.

1. ***Required Fields*.*** There are required fields on the eCVI . They must remain required and be completed in order for the certificate to be issued and official.
2. ***Form Versions.*** As major enhancements are made to the certificate it will be updated and re-released to participating veterinarians. It is the veterinarian's responsibility to work with the Division of Animal Industry to ensure they are using the most current version.
3. ***Signing the form.*** The signature on this form is password protected and chosen by the issuing veterinarian. As the issuing veterinarian you will not share your password with any other party, including office staff, so that the digital signature is equivalent to a written signature. You also agree to digitally sign all issued eCVI's personally.
4. ***Distributing to Veterinarians.*** This certificate will only be distributed to veterinarians that are licensed in the state of Colorado and federally accredited through USDA-APHIS-VS. This distribution of this form is done **solely** by the Division of Animal Industry. You are **NOT** to share this form with any other party outside of the practice listed below.
   - ***Exception:*** Issued (locked and finalized) eCVI's may be emailed to the consignor or consignee upon that party's request. Editable/unlocked forms may **NOT** be shared.
5. ***Changes to the Certificate.*** You agree not to change the form in any way regarding its formatting or design. Only the editable data fields may be filled for the purpose of issuing an eCVI.
6. ***Form Submission.*** You agree to submit each completed/issued eCVI by email no later than 1 week after completion.

By signing this form you agree that you have read through the above and agree to all of the terms in this agreement.

Veterinarian Name	Veterinarian Signature	Date		
Clinic Name	Clinic Address	City	State	Zip
USDA Accreditation Number	CO License Number	Phone		
Email	USDA Accreditation Type	Select One		
	I (Small Animal Only)	☐		
	II (All Animals)	☐		

Please send this signed form by email to animalhealth@state.co.us or mail/fax to the contact below.