

Montana eCVI - Version 3.0

Electronic Certificate of Veterinary Inspection

Montana Department of Livestock

Montana Department of Livestock *A visual guide to the Montana eCVI.*

Animal Health Division

PO Box 202001

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Helena, MT 59620-2001

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eCVI@mt.gov

eCVI QUICK REFERENCE

- Required software: Adobe Reader XI (free download available at <http://get.adobe.com/reader/>)
- Internet service is not required to create or finalize an eCVI.
- Copy and paste lengthy statements into the “Health Statements” field of the eCVI.
- Create templates by saving partially completed eCVIs with veterinarian information and/or frequent consignors.
- The eCVI must be saved a second time IMMEDIATELY after signing and saving.
- Always use the grey ‘save form’ button in the lower left of the form (not ‘File’, ‘Save’).
- Please use the state of destination as the first two letters of the filename for completed eCVIs. Develop a consistent file naming system for completed eCVIs. ex: “WY_2014.04.14 Smith Ranch”
- DO NOT use commas in your filename. This creates issues when converting the data for upload.
- Signing the eCVI permanently locks all information except the permit number field.
- Customized signature options allow an image of your actual signature to appear on the printed form.
- Voids are not tracked – they may simply be deleted.
- Completed eCVIs may be emailed directly to clients to be printed.
- Email completed eCVIs to eCVI@mt.gov (due to their large size, no more than 4-5 per email)
- Lists of official ID, test charts, etc. should be attached to the submission email. Be sure to note attachments on the CVI AND note the CVI# on the attachment.
- For large quantities of eCVIs, [Dropbox](#) may be used to share files with eCVI@mt.gov.
- MDOL will forward completed eCVIs to the state of destination.
- If using a web-based email (such as Gmail, Yahoo, Hotmail, etc), do not use the “Submit” button.

COMMON PROBLEMS

- Mistakes on an eCVI
 - Mistakes cannot be corrected once an eCVI is signed. The best thing to do is void it and start over. If the shipment has already departed, create a new eCVI with the correct information and put a note in the Health Statements box: “This CVI is a correction to CVI#_____.” Submit both the corrected document and the original.
- “NULL” CVI Number
 - The CVI number will show as ‘81-[your license#]-NULL’ when the document is not saved properly. Always use the ‘Save Form’ button on the lower left of the page to save (not ‘File’, ‘Save’). After signing, immediately use the ‘Save Form’ button to save a second time over the file you just saved.
 - If a “NULL” CVI number appears, right click on the signature field, select “Clear Signature” and click OK on the pop-up message. Sign again, as described above.
- For any other issues, please contact Sara Starkey: SStarkey@mt.gov, 406-444-9622.

eSIGNATURE SETUP

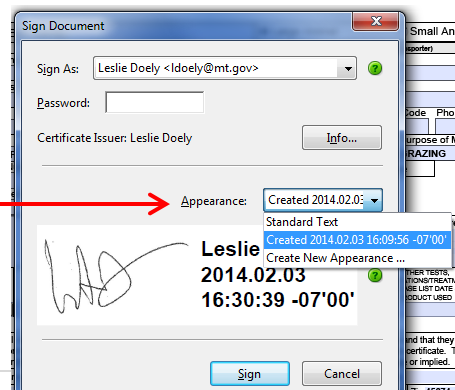
Basic Setup:

1. Open the eCVI in Adobe Reader
2. Go to Edit
 - a. Preferences → Signatures Category
 - i. Under “Identities and Trusted Certificates” click “More”
 1. Select “Add ID”
 2. New digital ID
 3. Next
 4. New PKCS#12 digital ID file
 5. Next
 6. Enter Name, organization unit/name, and email address
 - a. Do not edit “enable Unicode support”, “key algorithm” or “use digital ID for”
 7. Create a password
 8. Finish
 - ii. Close

Customized Signature: (Optional)

1. Sign a blank white paper with a thick felt pen or Sharpie marker
2. Scan your signature with high resolution, crop the image, and save it as a pdf document
3. Open the eCVI in Adobe Reader
4. Go to Edit
 - a. Preferences, Signatures Category
 - i. Under “Creation & Appearance” click “More”
 1. Under Appearance, select New
 2. Next to Appearance, click “Create new appearance”
 - a. Type the name that will appear next to your signature
 - b. Select radio button next to Imported graphic
 - i. Click “file” to browse for your pdf signature
 - c. OK
 3. Under Configure Text
 - a. Select which items you wish to appear next to your name (changes should be visible in the preview above)
 - ii. OK

5. When you are ready to sign your first document, select your appearance from the drop-down



COMPLETING THE ECVI

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Animal Health Division
PO Box 202001 Helena, MT 59620-2001
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MONTANA CERTIFICATE OF VETERINARY INSPECTION

Contact State of Destination for Movement Requirements and Certificate Validity
FOR FOREIGN SHIPMENTS (Outside United States or Leaving United States) USE FEDERAL FORM

Certificate Number

1 81-null-null

OFFICIAL USE ONLY: The Veterinarian issuing this certificate is accredited and has been authorized to inspect animals and issue certificates.

ENTRY PERMIT #: 2		INSPECTION DATE: 3		SHIPMENT DATE: 4		<input type="radio"/> Large Animal 5 <input type="radio"/> Small Animal			
CONSIGNOR - Contact Person at Origin First Name Last Name AND/OR Business Name 6 Physical Address of Animals City State Zip Code County Phone Number Location ID# 11 Consignor's Address (if different)				CONSIGNEE - Contact Person at Destination First Name Last Name AND/OR Business Name 7 Physical Address of Animals City State Zip Code County Phone Number Location ID# Consignee's Address (if different) 8 Print Reconsigned				CARRIER (Transporter) Business Name 9 Physical Address City State Zip Code Phone Number Transport Method Purpose of Movement 10 <input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	
OWNER/AGENT STATEMENT "The animals in this shipment are those certified to and listed on this certificate." DATE 15 SIGNATURE Save Form 18		VETERINARY CERTIFICATION - I certify, as an accredited veterinarian, that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable disease (except where noted). The vaccinations and results of tests are indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the state of destination and federal interstate requirements. No further warranty is made or implied. Date Printed Name 16 Phone Email Address City State Zip USDA Accreditation # State of License MT License # Signature 17							

NOT OFFICIAL

ver2.1

Required fields will remain RED/PINK until completed

- | | |
|---|---|
| <ol style="list-style-type: none"> 1. Certificate Number 2. Entry Permit Number 3. Inspection Date 4. Shipment Date 5. CVI Type
(creates 11a & 11b) 6. Consignor Information 7. Consignee Information 8. Reconsignment button 8a. Reconsignment Form | <ol style="list-style-type: none"> 9. Carrier Information 10. Movement Type 11. Shipment Information: 12. Veterinarian Comments 13. Flock/Herd Accredited Status 14. Origin State/ Area Status 15. Owner Signature and Statement 16. Veterinarian Information 17. Electronic Signature 18. Save Form Button |
|---|---|

Certificate Number

81-null-null

1. Certificate Number:

The final CVI number is generated after the form is Signed (16) and Saved (17).

2. Entry Permit #:

ENTRY PERMIT #:

This is the only field that remains editable after the form is Signed (16) and Saved (17)

Permit line phone numbers are available at www.liv.mt.gov/ah/statevets/default.mcp.

8. Reconsignment button:

Print Reconsigned

Checking this box generates field (8a) at the bottom of the certificate:

8a. Reconsignment field:

RECONSIGN TO: Name _____	Reconsigned Premises ID # _____
Physical Address _____	City _____ State _____ Zip _____ Phone # _____
CERTIFICATE MUST BE COUNTERSIGNED BY AN ACCREDITED VETERINARIAN	
_____ Accredited Veterinarian Signature	

11. Shipment Information:

This form is generated by selecting either Large Animal or Small Animal in (5).

11a. Large Animal

Disease Certification Statements 12				Flock/Herd Accredited Free For: <input type="checkbox"/> Tuberculosis <input type="checkbox"/> Brucellosis <input type="checkbox"/> Scrapie <input type="checkbox"/> NPIP <input type="checkbox"/> Johne's <input type="checkbox"/> PRV <input type="checkbox"/> CWD <input type="checkbox"/> Other (specify) _____				Herd/Flock # 13		Current State/Area Status: 14							
SPECIES	# OF HEAD	OFFICIAL PERMANENT ID	OTHER ID (REGISTRY NAME, NUMBER OR DESCRIPTION)	AGE	SEX	BREED	TB DATE OBSVD	TB TEST RESULT	BRUC TEST DATE	BRUC TEST RESULT	BRUC VACC TATTOO	EIA TEST DATE	EIA LAB NAME	EIA TEST RESULT	OTHER TESTS, VACCINATIONS/TREATMENT. PLEASE LIST DATE & PRODUCT USED		
TOTAL																	
Add New Row Delete Last Row Copy Delete																	

- The “Species” drop-down menu creates corresponding “Breed” menus.
- Animals may be entered in groups or as an individual animal on each line.
- The number of animals in the shipment is totaled automatically.
- Use the “Copy” button to create multiple animals with similar information.
- Health statements may be typed or copied/pasted into the “Disease Certification Statements” box (12).
- Statements fields and “Other ID” fields expand to accommodate additional text.

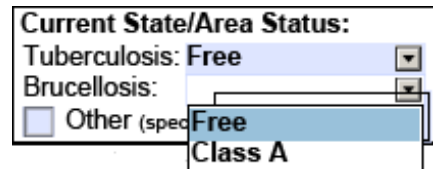
11b. Small Animal

Weather Acclimation Statement 12										
SPECIES	# OF ANIMALS	DESCRIPTION / BREED / MICROCHIP	AGE	SEX	RABIES VACC DATE	RABIES BOOSTER DUE	RABIES TAG NUMBER	RABIES SERIAL NUMBER	OTHER TESTS, VACCINATIONS/TREATMENT. PLEASE LIST DATE & PRODUCT USED	
TOTAL										
Add New Row Delete Last Row Copy Delete										

- Animals may be entered in groups or individually.
- The number of animals in shipment is totaled automatically.
- Health statements may be copied/pasted into the “Weather Acclimation Statement” box (12).
- Statements fields and Description fields expand to accommodate additional text.

14. Current State/Area Status: (on sub-form (11a))

- Select “Tuberculosis: Free” and Brucellosis “Free”



15. Veterinarian Information:

VETERINARY CERTIFICATION - I certify, as an accredited veterinarian, that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable disease (except where noted). The vaccinations and results of tests are indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the state of destination and federal interstate requirements. No further warranty is made or implied.

Date	Printed Name	Phone	Email	
Address		City	State	Zip
USDA Accreditation #	State of License	MT	License #	

Your state license number will become part of the finished CVI number.

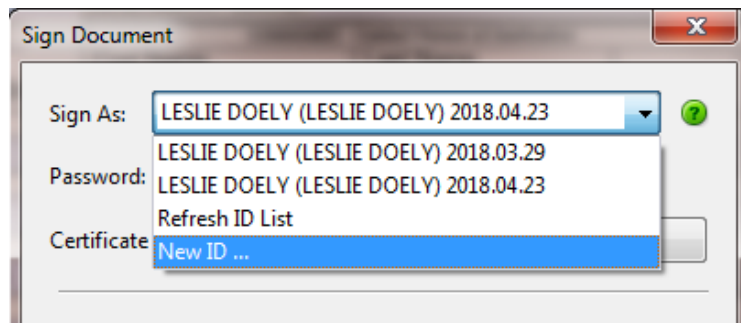
To obtain your USDA accreditation #, please contact USDA, APHIS, VS at 406-449-2220.

16. Veterinarian Signature*



*See page 2 for eSignature Setup.

- Required fields (red/pink) must be completed before signing
- Click the Signature Tab
- Select your ID from the list
- Select your signature appearance from the drop-down list (if applicable, see page 2)
- Type your password
- Click “Sign”

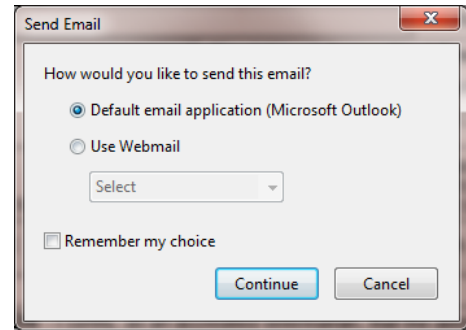


17. Saving

- Signing prompts you to save the eCVI
 - Start the filename with the state of destination abbreviation
 - Type the filename you wish to use for this eCVI in the File Name box
- THE eCVI MUST BE SAVED A SECOND TIME – a popup message will remind you to save
 - Click ‘Save Form’
ALWAYS USE THE GREY ‘SAVE FORM’ BUTTON IN THE LOWER LEFT OF THE FORM (not ‘File’, ‘Save’)
 - Save OVER the filename you just created
- Signing locks all information except the permit number field

18. Submit and Print:

- “Submit Form” and “Print Form” buttons are generated after the form is signed
- For software-based email (such as Outlook)
 - To submit your eCVI, click “Submit Form”
 - Select your email type and click Continue



- An email to eCVI@mt.gov is created with the completed eCVI attached.
 - Attach additional documents to the email (such as a list of IDs) as needed
- For web-based email users (such as gmail, yahoo, Hotmail, etc)
 - Create an email to eCVI@mt.gov and attach the completed eCVI
 - Do not use the “Submit Form” button
 - You may attach multiple completed eCVIs to one email (usually 4 or 5 is the maximum number of eCVI files you can attach due to size limitations)
- For large numbers of completed files, you may use www.Dropbox.com to share an entire file of eCVIs with eCVI@mt.gov.
- MDOL will forward your eCVI to the state of destination.