

Minnesota Electronic Certificate of Veterinary Inspection (MN eCVI) Ver3.2 A How-To Guide

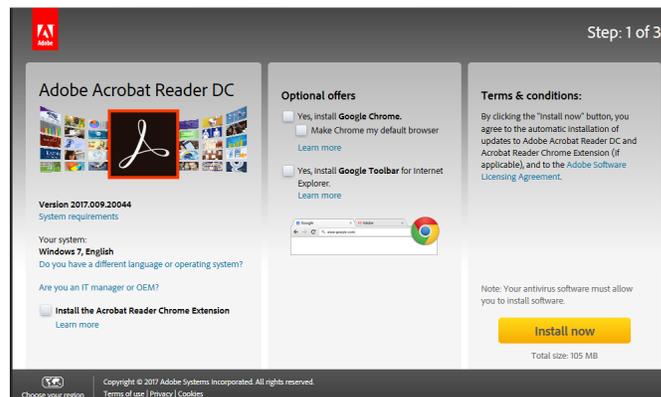


Graphic created by Colorado Department of Agriculture

Completing an electronic Minnesota Certificate of Veterinary Inspection (MN eCVI)

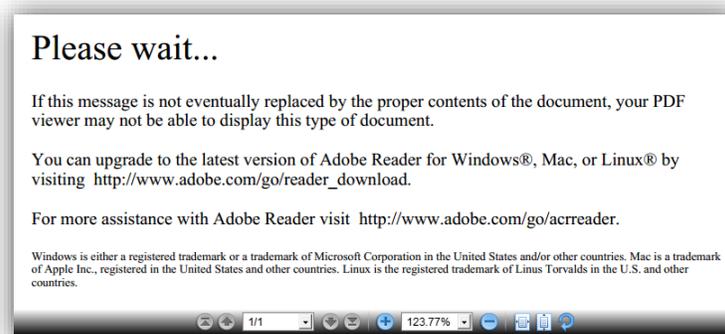
Part One – Setting up the MN eCVI

1. Download Adobe Reader for free at: <http://get.adobe.com/reader/>. It is not necessary to download the ‘Optional offers’.



2. Once you receive the MN eCVI PDF file via email, save the attachment to your computer. We recommend keeping two copies of the original file on your computer to ensure the original file is not accidentally written over when creating new MN eCVIs. We suggest placing one of the copies in a file folder where you keep templates or other important documents and the other in a backup folder.

Note: A common issue is that when viewing the eCVI PDF in an email, or internet browser such as Microsoft Edge or Chrome, the following message may appear:



It is important that the eCVI be processed using Acrobat Reader. This eCVI cannot be rendered by many PDF viewers. The PDF will open when Acrobat Reader is used to open the file. Save the attachment, navigate to the file, right click on it, select ‘open with’, and select Adobe Reader DC if there are any issues. We recommend you set ‘Adobe Reader DC’ as your default viewer for PDF files.

General Tips:

- Hovering over any field slowly with the mouse cursor will allow a message box to appear that gives information pertaining to the field.

- When you type text into fields (except the animal list), the text will format automatically to capitalize the first letter of each word when you exit the field (tab or click out).
 - A tab order is set. If you click in 'First Name' in the consignor section and begin typing, when finished, hit 'Tab' on your keyboard to move to the next field. When you approach the end of the consignor section, hitting tab will bring you to the consignee section, etc.
 - If you tab or click into a field with drop-down menus, in all but the 'Transport method' or 'Purpose of Movement Field', if you type the first letter of the State, County, Species, etc., it will select what you type. If there are multiple choices with the same beginning letter, hit the same letter again to move to the next word, or use the down arrow on your keyboard. Tab into the next field or click into the next field to commit.
 - The 'Zip Code' must be 5 digits and 'Phone Number' must be 10 digits. Do not use dashes, parentheses, or spaces... Just use numbers and they will be formatted appropriately when you exit the field.
3. For the first template(s), to make processing easier, open the MN eCVI and fill out the Veterinarian Certification section at the bottom of the MN eCVI, except the date, for each veterinarian in the clinic that signed the User Agreement. Required fields are highlighted in red (and marked with an asterisk in this document):

Figure 1

- When filling out section, click in the '**Printed Name**' field, type the veterinarian's name, and use the 'Tab' key to move to the next field. Alternatively, use the mouse and click in each field
 - Certifying Veterinarian Name and Contact Information***: Fill in completely, including federal accreditation number (an alert will remind you to include the leading 0)
 - License Number***: Enter your Minnesota state license number.
4. We suggest saving each template with the Veterinarian's name and in a location that is easily accessible. Every instance this template is opened, the Veterinarian's information will be pre-populated and will save time. These

templates or working copies, can be copied onto each computer, in your network file, cloud storage, or whatever electronic storage option your office would like to use to retrieve and generate eCVIs.

- We suggest creating a folder to hold all the templates, a folder for the completed eCVIs, and a folder within that where you can move the completed eCVIs once you have emailed them to us (suggested naming conventions below). If you are using a network drive or cloud storage over multiple computers, create a folder for digital signature files there as well (see Part 5, number 10).

Part Two – Filling out the top portion of the MN eCVI

Instructions:

- Open up a working copy/template of the MN eCVI.
- To prevent accidentally saving over a template, save the file with the new name using a naming convention that works for your practice. For example, use the client’s last name and the date the MN eCVI was issued, e.g., Anderson YYYY-MM-DD, will allow the ability to sort a folder by client name and date.
- Fill in the fields just as you would a paper CVI. As seen in the figure below, all fields highlighted in red are required fields (and noted with an asterisk below). *Note:* You can save at any point throughout the process and retain all of the information up to that point for that file. This yields the ability to save templates for frequent clients or movements. Simply fill out their information and then save the form as a new file, e.g., Anderson Farm Template.

The image shows a screenshot of the MN eCVI form. At the top, it says "OFFICIAL USE ONLY: The Veterinarian issuing this certificate is accredited and has been authorized to inspect animals and issue certificates." The form is divided into several sections. Fields 1 through 7b are marked with numbered callouts. Fields 1, 2, 3, 5, 6, 7a, 7b, and 7c are highlighted in red, indicating they are required fields. The form includes sections for "ENTRY PERMIT #", "INSPECTION DATE", "SHIPMENT DATE", "CONSIGNOR - Contact Person at Origin", "CONSIGNEE - Contact Person at Destination", "CARRIER (Transporter)", and "Purpose of Movement".

Figure 2

Field Descriptions

Required fields are marked with an asterisk in this document.

Field 1. Entry Permit #: This field and the Shipment Date field are the only fields that can be added or edited and saved *after* the form has been digitally signed. Enter the state of destination's entry permit into this field.

Field 2. Inspection Date*: Enter the date that the animals were inspected. Use the drop down calendar (click the drop-down arrow that appears to the right of field once entered) or enter date manually in 'M/D/YY' format.

Field 3. Shipment Date: Enter the actual or estimated date that the animals will be shipped. Use the drop down calendar (click the drop-down arrow to the right of field once entered) or enter date manually in 'M/D/YY' format. This field can be edited after the digital signature is applied if the shipment date needs to be corrected.

Field 4. MN eCVI Type*: Choose whether this is a 'Large Animal' or a 'Small Animal' eCVI. Figure 3 and Figure 4 below shows the animal information sections expanded for each certificate type.

Section 5. Consignor*: Fill in all fields highlighted in red. The Consignor is the contact person at the origin. You must enter either a first and last name or a business name. If the consignor’s address is different than the location of the animals, use the last line to denote the address. The ‘Physical Address of Animals’ field in this section is the address where the animals are standing when inspected.

Section 6. Consignee*: Fill in all fields highlighted in red. The Consignee is the contact person at the destination. You must enter either a first and last name or a business name. If the consignee’s address is different than the location of the animals, use the last line to denote the address. The ‘Physical Address of Animals’ field in this section is the address where the animals will be offloaded at the destination.

Field 6a. Print Reconsigned: Check this box only if the animal is going to a sale where the CVI will be used at the sale. Checking the box reveals a ‘Reconsigned’ field at the bottom of the CVI for later use.

Section 7. Carrier/Transporter: Fill out as much information as possible. Carrier Physical Address: This is the physical location of the carrier. DO NOT put a PO Box in this field!

Field 7a. Transport Method: Drop down menu, may manually complete. Select a Transport Method from the drop down list. If your method is not listed select 'Other' and type your method.

Field 7b. Purpose of Movement*: Drop down menu, may manually complete. Select a purpose of animal movement from the drop down list. If your purpose is not listed, select ‘Other’ and type your purpose.

Field 7c. Choose Interstate or Intrastate: Check the box to indicate type of movement.

The image shows a screenshot of the 'Large Animal MN eCVI' form. It is a complex form with multiple sections. At the top, there are fields for 'Disease Certification Statements' (1), 'Flock/Herd Accredited Free For' (7), and 'Current State/Area Status' (3). Below these are several columns for animal details: 'SPECIES' (4), '# OF HEAD' (5), 'OFFICIAL PERMANENT ID' (6), 'OTHER ID (REGISTRY NAME, NUMBER OR DESCRIPTION)' (8a), 'AGE' (8b), 'SEX' (8c), and 'BREED' (8c). There are also columns for various tests: 'TB DATE OBSVD', 'TB TEST RESULT', 'BRUC TEST DATE', 'BRUC TEST RESULT', 'BRUC VACC TATTOO', 'EIA TEST DATE', 'EIA LAB NAME', and 'EIA TEST RESULT'. A 'TOTAL' row is at the bottom of this section. The bottom half of the form is the 'OWNER/AGENT STATEMENT' (10) and 'VETERINARY CERTIFICATION' (11) section, which includes fields for 'Date', 'Printed Name', 'Phone', 'Email', 'Address', 'City', 'State', 'Zip', 'USDA Accreditation #', 'State of License' (MN), and 'License #'. There is a 'SIGNATURE' field (12) and a 'Save Form' button (13). The form is titled 'CERTIFICATE AND CERTIFICATE # OFFICIAL AFTER DIGITALLY SIGNED' and has a version number of 3.2.

Figure 3: Large Animal MN eCVI

Part Three – Filling out the bottom portion of the Large Animal MN eCVI

Field 1. Disease Certification Statements: Free form text. You can cut and paste a statement into this field. Enter statements concerning the health of the livestock or equine in this box. This field will expand to show all of your text. Please DO NOT use quotation marks!

Section 2. Flock/Herd Accreditation: Complete as needed.

Section 3. Current State/Area Status: Choose from the drop down menus as appropriate.

Field 4. Species*: Select a Species from the drop down list.

Field 5. # of Head*: Enter the number of head. If you are sending animals that are required to be individually identified, then you may only have one animal per line. If you are attaching an addendum, the total number of head in the addendum for that species should be included in this field.

Field 6. Official Permanent ID: Enter the official identification number of an animal here. Reserve this field for OFFICIAL ID ONLY. Enter ONE official permanent identification number of the animal in this row, up to 15 characters. If an animal has more than 1 official ID, enter others under 'Other ID'.

Field 7. Other ID: Enter registry name, number, description, or any other unofficial (or additional official) animal identification. This field will expand to show all of your text. Please DO NOT use quotation marks! This field should also be where 'See addendum' is noted if an addendum will be used to forward individual animal information such as a listing of official IDs and animal descriptions (age, sex, breed, etc.). This field is limited to 200 characters.

Fields 8a-8c. Age, Sex, Breed: Enter the two-part age of the animal, e.g., 6 M or 5 Y. Enter the sex and the breed of the animal. Note: If it is easier, tab through the animal list. For example, click into species, type 'B' for 'Beef Cattle', hit 'Tab' (Bovine is selected), type '1' and tab, enter ID# and tab, enter other ID and tab, type '5' and tab, type 'M' for 'Month' tab, type F for 'Female' and tab, type 'H' for 'Hereford' and tab, etc.

Section 9. Testing Information: Fill in test data, vaccinations, and/or treatments.

For multiple animals, blank rows may be added by selecting the 'Add Row' button. All of the information in the rows can be copied into a new row at any point by selecting the 'Copy' button. Specific rows can be deleted by selecting the 'Delete' button or the last row can be deleted by selecting the 'Delete Last Row'.

Section 10. Owner/Agent Signature: Contact the state of destination to determine if this step is necessary. If in the rare situation it is required, after the MN eCVI has been issued, print the form and have the owner/agent sign it. You will need to email the scanned copy as an attachment along with the issued MN eCVI.

Section 11. Veterinary Certification*:

Date*: Enter the date that the certifying vet is issuing the CVI. Use the drop down calendar or enter date manually in 'M/D/YY' format.

Veterinary Name and Contact Information*: Fill in completely, including federal accreditation number (be sure to include the leading 0). This will auto-fill the footer with your name and date and generate part of the certificate number.

License Number*: Use your Minnesota state license number.

Field 12. Signature*: The veterinarian must sign this personally by creating a digital signature with password (See Part 5). This will finalize the form and issue a certificate number. This will only work if all required fields have been completed. Once the signature is applied, the file you are working with becomes locked so that no fields can be edited, except the entry permit # field and shipment date field. Signing the document is like separating the paper copies and handing the owner their copy. This is the version of the form you will submit to the Minnesota Board of Animal Health and can email to clients as needed (see below). You will be prompted to save the file after signing. The certificate and certificate number is not valid unless a digital signature is present!

Note: If you click in the signature field after all of the required fields are filled out, and you cancel, a certificate number will be generated even though a signature was not applied. This certificate number is not official. When you re-click the signature field and digitally sign the form and save it, the certificate number will change and be locked, and now the certificate is official.

Field 13. Save Form: This is a 'Save As' Button for your convenience which helps prevent saving over templates. After the file name is changed, if you want to periodically save the form as the new name, press 'Ctrl S' simultaneously, or press the floppy disc icon, or File > Save.

Part Four – Filling out the bottom portion of the Small Animal MN eCVI

The screenshot shows a web-based form for a Small Animal MN eCVI. It features a table for animal data, a text area for weather acclimation, and signature sections for both the owner/agent and the veterinarian. Numbered callouts (1-9) point to specific fields: 1. Weather Acclimation Statement; 2. Species; 3. # of Animals; 4. Description/Breed/Microchip; 5. Age/Sex/Vaccinations; 6. Owner/Agent Statement; 7. Veterinary Certification; 8. Signature; 9. Save Form.

Figure 4: Body of Small Animal MN eCVI

Field 1. Weather Acclimation Statements: Free form text. You can cut and paste a statement into this field. Enter statements concerning the health of the small animals in this box. This field will expand to show all of your text. Please DO NOT use quotation marks!

Field 2. Species*: Choose a species. If the species isn't listed, select 'Other' and type the species in the description field (field 4 above).

Field 3. Number of Animals: Enter the number of animals per species.

Field 4. Description/Breed/Microchip: Enter animal information here.

Fields 5. Age, Sex, Vaccinations: Enter the two-part age of the animal, e.g., 6 D or 5 Y. Enter the sex, vaccinations, and/or treatments. Rows may be added, copied, or deleted as needed.

Section 6. Owner/Agent Signature: Contact the state of destination or airline to determine if this step is necessary. If it is required, after the MN eCVI has been issued, print the form and have the owner/agent sign it. You will need to email the scanned copy as an attachment along with the issued MN eCVI.

Section 7. Veterinary Certification*:

Date*: This is the issue date, use the drop down calendar or enter date manually in 'M/D/YY' format.

Veterinary Name and Contact Information*: Fill in completely, including federal accreditation number (be sure to include the leading 0). This will auto-fill the footer with your name and date and generate part of the certificate number.

License Number*: Enter your Minnesota state license number.

Field 8. Signature*: The veterinarian must sign this personally by creating a digital signature with password (See Part 5). This will finalize the form and issue a certificate number. This will only work if all required fields have been completed. Once the signature is applied, the file you are working with becomes locked so that no fields can be edited, except the entry permit # field and shipment date field. Signing the document is like separating the paper copies and handing the owner their copy. This is the version of the form you will submit to the Minnesota Board of Animal Health and can email to clients as needed (see below). You will be prompted to save the file after signing. The certificate and certificate number is not valid unless a digital signature is present!

Note: If you click in the signature field after all of the required fields are filled out, and you cancel, a certificate number will be generated even though a signature was not applied. This certificate number is not official. When you re-click the signature field and digitally sign the form and save it, **the certificate number will change** and be locked, and now the certificate is official.

Field 9. Save Form: This is a 'Save As' Button for your convenience which helps prevent saving over templates. After the file name is changed, if you want to periodically save the form as the new name, press 'Ctrl S' simultaneously, press the floppy disc icon, or File > Save.

MINNESOTA CERTIFICATE OF VETERINARY INSPECTION
 Certificate Number: **41-98765-null**

INSPECTION DATE: 05/06/2017 SHIPMENT DATE: Large Animal Small Animal

CONSIGNOR - Contact Person at Origin: Joe Smith, AND/OR Business Name: [blank]
 CONSIGNEE - Contact Person at Destination: John Smith, AND/OR Business Name: Dusty Ranch

Physical Address of Animals: 1234 Cattleyway, Northfield, MN 55057, Rice, Phone Number: (651) 123-4567

Physical Address of Animals: 123456 Co Rd 1, Pasture, CO, 85555, Phone Number: [blank]

Purpose of Movement: Breeding

Disease Certification Statements: [blank]

Flock/Herd Accredited Free For: Tuberculosis, Brucellosis, Scrapie, NPIP, Johne's, PRV, CWD, Other (specify): [blank]

SPECIES	# OF HEAD	OFFICIAL PERMANENT ID	OTHER ID (REGISTRY NAME, NUMBER OR DESCRIPTION)	AGE	SEX	BREED	TB DATE	TB TEST RESULT	BRUC DATE	BRUC TEST RESULT	BRUC VACC	BRUC TATTOO	EIA TEST DATE	EIA LAB NAME	EIA TEST RESULT	ACCESSION #	OTHER	
Beef Cattle	1	41ABC1234		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A				Copy Delete
Beef Cattle	1	41ABC1235		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A				Copy Delete
Beef Cattle	1	41ABC1236		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A				Copy Delete
Beef Cattle	1	41ABC1237		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A				Copy Delete
TOTAL	4	Add Row	Delete Last Row															

OWNER/AGENT STATEMENT: "The animals in this shipment are those certified to and listed on this certificate."
 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: 05/05/2017 Printed Name: Mary Jones Phone: (555) 555-5555 Email: vet@clinic.com

Address: 12345 Pine Ridge, City: Northfield, State: MN, Zip: 55057

USDA Accreditation #: 01017015 State of License: MN License #: 01017015

Signature: [Red arrow points to Signature field]

Save Form

CERTIFICATE AND CERTIFICATE # OFFICIAL AFTER DIGITALLY SIGNED

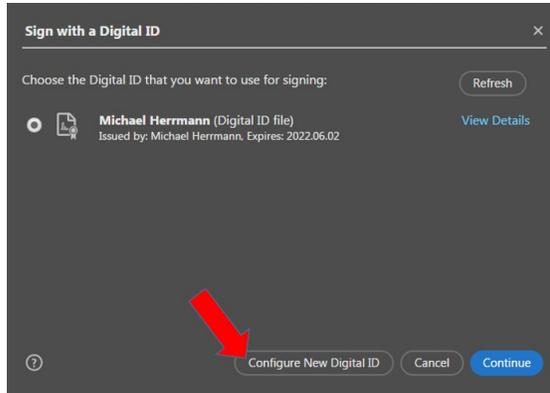
Certificate Signed by: Mary Jones Date: 05/05/2017 Certificate is only valid for 30 days from inspection. Page 1 of 1

Sample MN eCVI filled out but not signed.

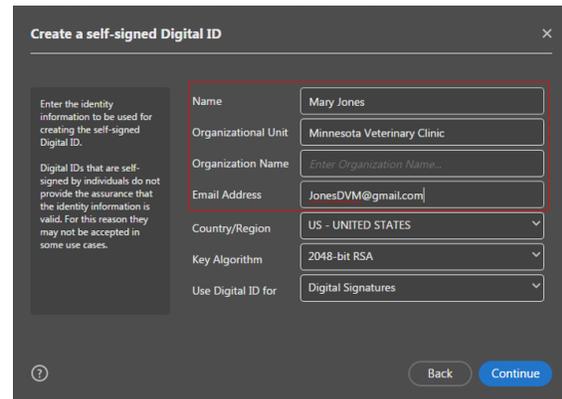
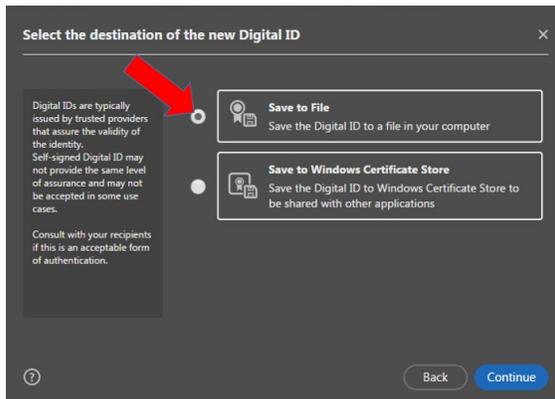
The next step is to review the information and then sign the form.
Note: The certificate number has not been issued as it still contains 'null'.

Part Five – How to create a digital signature

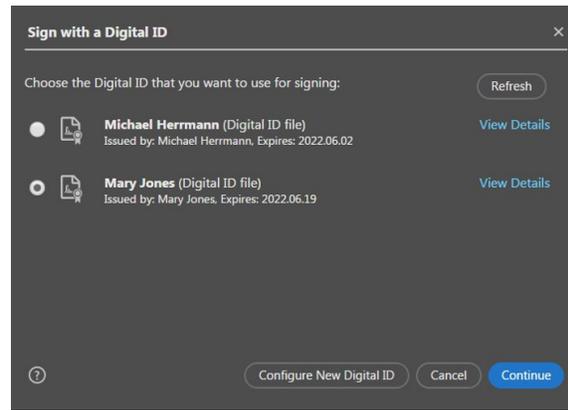
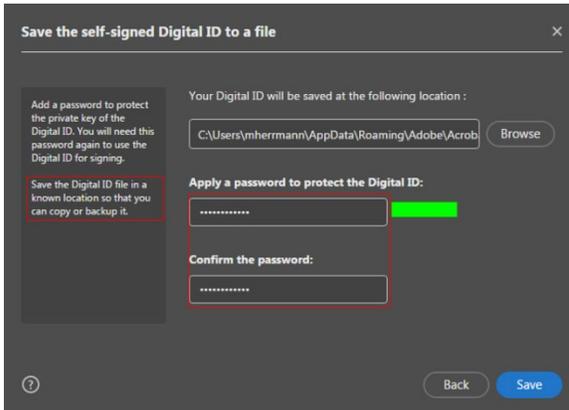
1. Once all of the required fields have been completed, click on the **Signature Field**. A dialog window will open.



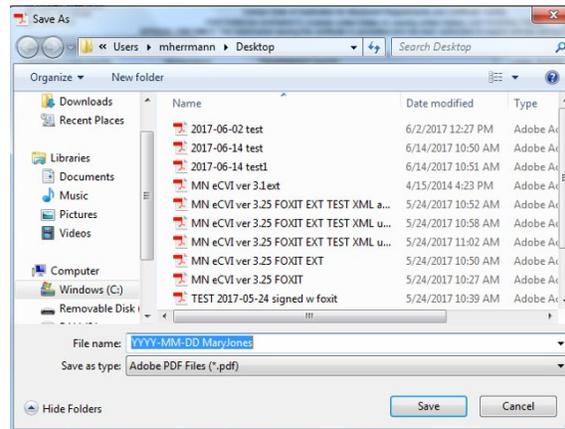
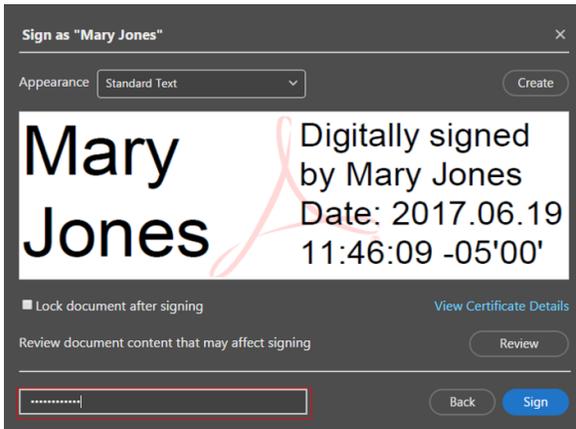
2. Select 'Configure New Digital ID'.
3. Select 'Continue'.
4. Select 'Create a new Digital ID'. Notice that if you have a Digital ID file, you can select that.
5. Select 'Continue'.



6. Select 'Save to File' to save the Digital ID to a file on your computer.
7. Select 'Continue'.
8. Enter your name. The Organization Unit is your practice/clinic name. Enter your email address. Leave the other fields in their default settings.
9. Select 'Continue'.



10. Select 'Browse' to select where you want to store your Digital ID file if you will be using the Digital ID on more than one computer. The Digital ID can be copied or retrieved on other computers (works well with shared network folder or cloud storage). Otherwise, leave the default location.
11. Enter and confirm your password. Remember not to share this with others; this is equal to your written signature that you put on paper CVIs.
12. Select 'Save'
13. If there are multiple Digital IDs available on your computer, select your Digital ID.
14. Select 'Continue'.



15. Enter your password.
16. Select 'Sign'.
17. After selecting 'Sign' you will be prompted to save the document. You cannot sign the form without saving it. It is important to save over the file you already renamed or rename the file here with your chosen naming convention in your chosen file location, e.g., client's last name & date.pdf in 'CVIs to send' folder, for example. You want to change the name of the document (if you haven't already) so you do not overwrite your original blank file.
18. In the future, when you click on the signature field, only the screen appears where you simply select your Digital ID and 'Continue'. Follow steps 13-17 to sign.

Note: As seen in the screen where you select the type of digital ID you want to create (step 4), you can 'Use a Digital ID as a file'. This means that you can copy and move your Digital ID to other computers, store it on a network drive, or cloud storage and retrieve it to use it on other computers if desired.

Once signed, next to the 'Save Form' button, the 'Print' and 'Submit by Email' buttons will appear.

Note: If you click in the signature field after all of the required fields are filled out, and you cancel the digital signature process, a certificate number will be generated even though a signature was not applied. This certificate number is not official. When you re-click the signature field and digitally sign the form and save it, **the certificate number will change** and be locked, and now the certificate is official.

Certificate Number: This will automatically be generated once the form is signed:

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

Certificate Number
41-98765-1501260989

ENTRY PERMIT #: _____

INSPECTION DATE: 05/06/2017 SHIPMENT DATE: _____ Large Animal Small Animal

CONSIGNOR - Contact Person at Origin **CONSIGNEE - Contact Person at Destination** **CARRIER (Transporter)**

First Name: Joe Last Name: Smith AND/OR First Name: John Last Name: Smith AND/OR Business Name: _____

Business Name: _____ Business Name: _____ Physical Address: _____

Physical Address of Animals: 1234 Cattleway Physical Address of Animals: 123456 Co Rd 1 City: _____ State: _____ Zip Code: _____ Phone Number: _____

City: Northfield State: MN Zip Code: 55057 County: Rice City: Pasture State: CO Zip Code: 65555 County: _____ Transport Method: _____ Purpose of Movement: Breeding

Phone Number: (651) 123-4567 Location ID#: _____ Phone Number: _____ Location ID#: _____ Interstate Intrastate

Consignor's Address (if different): _____ Consignee's Address (if different): _____ Print Reconsigned

Disease Certification Statements: _____ Flock/Herd Accredited Free For: _____ Herd/Flock #: _____ Current State/Area Status: _____

Tuberculosis Brucellosis Scrapie NPIP
 Johne's PRV CWD Other (specify): _____

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	ACCESSION #	OTHER	
Beef Cattle	1	41ABC1234		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A			Copy Delete
Beef Cattle	1	41ABC1235		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A			Copy Delete
Beef Cattle	1	41ABC1236		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A			Copy Delete
Beef Cattle	1	41ABC1237		3	M	Dexter	07/01/2017	NEG	07/05/2017	NEG	RV7	N/A	N/A	N/A			Copy Delete
TOTAL	4	Add Row	Delete Last Row														

OWNER/AGENT STATEMENT
 "The animals in this shipment are those certified to and listed on this certificate."

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: 05/05/2017 Printed Name: Mary Jones City: Northfield Phone: (555) 555-5555 Email: vet@clinic.com

Address: 12345 Pine Ridge State of License: MN License #: 0101017015 State: MN Zip: 55057

USDA Accreditation #: 0101017015

Signature: Mary Jones Digitally signed by Mary Jones Date: 2017.07.28 11:58:04 -05'00'

CERTIFICATE AND CERTIFICATE #
 OFFICIAL AFTER DIGITALLY SIGNED

Save Form Print Form Submit by Email

Version 3.2

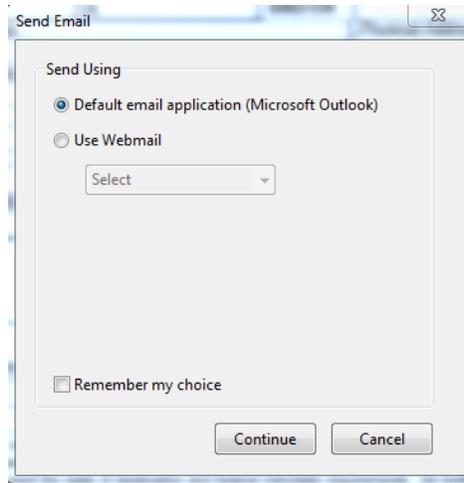
Certificate Signed by: Mary Jones Date: 05/05/2017 Certificate is only valid for 30 days from inspection. Page 1 of 1

Sample signed MN eCVI.

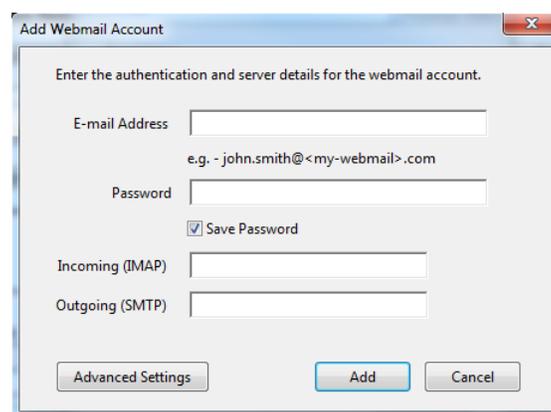
The next step is to submit the form via email to the MN Board of Animal Health trace@state.mn.us.
Note: The certificate number has been issued and all fields (except 'entry permit #' and 'shipment date') are locked.

Part Six – Submission of the MN eCVI to the Minnesota Board of Animal Health

1. Select the 'Submit by Email' button. A pop-up screen will appear.



2. Select Default email application (Microsoft Outlook) if you are using that. When you select 'Continue', an email will automatically be generated, the health certificate will be attached with the trace@state.mn.us filled in as the 'Recipient' and the subject line 'Issued MN eCVI'. It would make our procedures easier if you add the species to the subject line or include it in the file name. If addendums or other info needs to be attached, they can manually be added. Send the email.
3. If you do not use Outlook or a default email application, select 'Use Webmail' if you use a service such as Gmail, Yahoo, or other. If you select 'Use Webmail' the dropdown lists: 'Use Gmail...', 'Use Yahoo...', or 'Add Other...'. If you select either of the first two, you will be prompted to enter your email account information. If you select 'Add Other...' the following prompt appears and you will need to provide your User Name, Password, and IMAP and SMTP details:



4. Alternatively, open your email provider account. Compose a new email. Attach your completed MN eCVI and send the MN eCVI to: trace@state.mn.us. If you are using a Large Animal MN eCVI with an addendum, attach that addendum to this same email.

Note: It is recommended to email in the MN eCVIs as soon as they are completed. They must be submitted within 7 days. Do not print and mail or fax in the MN eCVI, they must be received electronically via email in their original electronic form (not printed and scanned, unless an owner signed copy is accompanying the original signed electronic copy).

Part Eight – Issued MN eCVIs for Airline Travel

1. Some airlines will only accept CVIs for traveling pets if the CVI has a hand-written signature. It would be acceptable for you to issue the MN eCVI, print a copy for the client, and sign that copy in ink (in addition to the digital signature you placed to issue it). This printed copy with an ink signature would then be used for the client traveling via airline with their pet(s).
2. Please continue to email in the copy to our office in its original electronic form (with only the digital signature). An ink signed copy should not be forwarded to our office for paper copies received can result in duplicate processing of the documents.

Tip: If the form has been signed, and a mistake is recognized, you can right click on signature, clear, and it will remove the signature and unlock all fields. The eCVI will still have a certificate number, which will no longer be valid or official. You will not be able retrieve the same certificate number in any circumstance, as it is void. All necessary steps will need to be taken to communicate with state agencies and clients that it is void if it was issued. A new certificate number will be generated after you fix the error, add the digital signature, and save the corrected eCVI.

Note: After digitally signing the eCVI, the shipment date and permit number fields are not locked. If these fields must be used, the recipients of the eCVI will have to open the issued eCVI in Adobe Reader, as the document has been altered after being digitally signed, and the signature validation causes issues with other PDF readers. If nothing is added after the digital signature is applied, all recipients that receive the eCVI will be able to open in the PDF viewer of their choice.

For assistance, contact 651-296-2942, TTY: 800-627-3529 or trace@state.mn.us