



Date: \_\_\_\_\_

**REPORT OF DEATH OF PETS**

**COPIES OF ID CARD & LICENCE OF OWNERSHIP ARE TO BE ATTACHED**

Name of Present Owner: \_\_\_\_\_

Address: \_\_\_\_\_

ID Card No: \_\_\_\_\_ Mobile/Telephone No: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

Name of Pet: \_\_\_\_\_

Microchip No: \_\_\_\_\_

\_\_\_\_\_  
**Present Owner**

\_\_\_\_\_  
**Department Official**

The Veterinary Regulation Directorate collects and processes information to carry out its functions under the Veterinary Service Act (Chapter 437) and the Animal Welfare Act (Chapter 439) together with their subsidiary legislations. All personal data collected is processed according to the principles specified in the General Data Protection Regulation (EU 2016/679) and the Data Protection Act (CAP440). Such data may be disclosed to other departments and/or authorities which are directly related to the functions pertaining to the Veterinary Regulations Directorate and the legislations mentioned above, however it will not be disclosed to other third parties unless obliged by law.

Please send this form to:  
The Microchipping Office,  
Main Building Room 4,  
Animal Health and Welfare Department,  
Abattoir Street,  
Marsa. MRS1123. Malta

Email: [veterinaryregulation.mafa@gov.mt](mailto:veterinaryregulation.mafa@gov.mt).