

**Tremain Veterinary- DAR Kona**  
**73-1348 Kukuna St., Kailua-Kona, HI 96740**

KONA AIRPORT INSPECTION CONFIRMATION

Date: 10/09/2025

To: Animal Quarantine Station

Phone: (808)483-7151

Fax: (808)483-7161

From: Tremain Veterinary

Phone: (808)895-5369

THIS E-CONFIRMATION IS TO CONFIRM THAT THE FOLLOWING ANIMAL(S) WILL BE  
RECEIVED AND INSPECTED BY TREMAIN VETERINARY AT THE KONA AIRPORT

**Please check one of the following:**

☒ New Arrival

☐ Reschedule (please indicate previous DOA: \_\_\_\_\_ )

Date of Arrival: 11/30/2025 Time of arrival: 5:40 PM

Airline and flight number: Alaska Airlines - 238 *\*If private aircraft, state tail # or name of carrier service\**

Owner name: Hannah Lidahl

Owner phone number: 6513479256

Owner e-mail (**REQUIRED**): hannahlidahl7@gmail.com

**\*\*If any information is incomplete or microchip number is incorrect, the confirmation will  
be returned to you for correction.**

**Pet information:**

|            |                        |
|------------|------------------------|
| Name:      | <u>Soula</u>           |
| Microchip: | <u>981020037516784</u> |
| Species:   | <u>Canine</u>          |
| Sex:       | <u>FS</u>              |
| Color:     | <u>TRI</u>             |
| Age:       | <u>5</u>               |
| Breed:     | <u>BER</u>             |

|            |       |
|------------|-------|
| Name:      | _____ |
| Microchip: | _____ |
| Species:   | _____ |
| Sex:       | _____ |
| Color:     | _____ |
| Age:       | _____ |
| Breed:     | _____ |

|            |       |
|------------|-------|
| Name:      | _____ |
| Microchip: | _____ |
| Species:   | _____ |
| Sex:       | _____ |
| Color:     | _____ |
| Age:       | _____ |
| Breed:     | _____ |

|            |       |
|------------|-------|
| Name:      | _____ |
| Microchip: | _____ |
| Species:   | _____ |
| Sex:       | _____ |
| Color:     | _____ |
| Age:       | _____ |
| Breed:     | _____ |