

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

KONA AIRPORT INSPECTION CONFIRMATION

Date: 11/14/2025

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: 12/18/2025 Time of arrival: 5:20 PM

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

Owner name: Margaret Glass

Owner phone number: 7066291321

Owner e-mail (**REQUIRED**): Margeliz.glass@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>Lila</u>            |
| Microchip: | <u>956000010670827</u> |
| Species:   | <u>Canine</u>          |
| Sex:       | <u>F</u>               |
| Color:     | <u>SLT</u>             |
| Age:       | <u>7</u>               |
| Breed:     | <u>HAV</u>             |

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

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

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