According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0049, 0054, and 0207. The time required to complete this information collection is estimated to average .17 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved 0579-0049, 0054 and 0207

sources, gathering and maintainir	-	nu completing									
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE PLANT PROTECTION AND QUARANTINE PERMITS AND RISK ASSESSMENT, UNIT 133		SECTION A – TO BE COMPLETED BY THE APPLICANT									
		1. NAME, TITLE, AND ADDRESS (Include ZIP Code)									
RIVERDALE, MARYLA											
APPLICATION FOR PER											
LIVE PLANT PESTS OR NO											
3. TYPE OF PEST TO BE MOVED											
* Pathogens Arthropods Noxious Weeds Other (Specify)											
This permit does not authorize the introduction movement, or release into the environment of engineered organisms or products.	2. TELEPHONE NO. ()										
A. B. CLASSIFICATION		C. LIFE D. NO. OF E.					F. ARE PEST	G.			
SCIENTIFIC NAMES OF	(Orders, Familites,	STATES,			SHIPPED I			MAJOR HOST(S) O	F THE PEST		
PEST TO BE MOVED	Races, or Strains)	APPLICAB	LE UNI	TS	(Country or State)		IN U.S.?				
4.											
5.											
6.											
7. WHAT HOST MATERIAL OR SUBS	STITUTES WILL ACCOM	IPANY WHICH	PESTS (Indicate	by line nu	umber)						
8. DESTINATION	lg p	ORT OF ARRIV	'AL			10 AF	PROXIMATE DA	ATE OF ARRIVAL OR			
S. DEGINATION	3. 1	S.C. S. ARRIVE					ERSTATE MOV				
11. NO. OF SHIPMENTS 12. SI	UPPLIER				13. METH	IOD OF	SHIPMENT				
						ir Mail	Air Freig	ht Baggage	Auto		
14. INTENDED USE (Be specific, attac	ch outline of intended rese	earch)									
, ,		ŕ									
15. METHODS TO BE USED TO PREV	VENT PLANT PEST ESC	CAPE	16. ME	ETHOD C	OF FINAL DIS	POSIT	ION				
17 Applicant must be a resident of the LLS A	i	SIGNATURE	E ADDI ICANIT (A	flust ha na	arcan namad	in Itom	1)	18 DATE			
17. Applicant must be a resident of the U.S.A I/We agree to comply with the safeguards		SIGNATURE O	F APPLICANT (M	lust be pe	erson named	in Item	1)	18. DATE			
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STANDARD SAFEGUARDS OF PERMIT

- 1. All pests must be shipped in sturdy, escape-proof containers.
- 2. Upon receipt of pests, all packing material media, substrate, soil and shipping containers shall be sterilized or destroyed immediately after removing pests.
- 3. Pests shall be kept only within the laboratory or designated area at the permittee's address.
- 4. No living pests kept under this permit shall be removed from confined area except by prior approval from State and Federal regulatory officials.
- 5. Without prior notice and during reasonable hours, authorized PPQ and State regulatory officials shall be allowed to inspect the conditions under which the pests are kept.
- 6. All pests kept under this permit shall be destroyed at the completion of the intended use, and not later than the expiration date, unless an extension is granted by this issuing office.
- 7. All necessary precautions must be taken to prevent escape of pests. In the event of an escape, notify this office.