

Failure to supply all applicable information can delay the processing of this application.

PLEASE TYPE OR PRINT CLEARLY.

<p>OMB Approved <input type="checkbox"/> AIR <input type="checkbox"/> SEA <input type="checkbox"/> LAND <input type="checkbox"/> ANY</p>	<p>OMB Approved <input type="checkbox"/> AIR <input type="checkbox"/> SEA <input type="checkbox"/> LAND <input type="checkbox"/> ANY</p>	<p>OMB Approved <input type="checkbox"/> AIR <input type="checkbox"/> SEA <input type="checkbox"/> LAND <input type="checkbox"/> ANY</p>
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<p>APPLICATION FOR PERMIT TO: IMPORT OR TRANSPORT CONTROLLED MATERIAL OR ORGANISMS OR VECTORS</p>	<p>FEAT U O O A J O A V O C E P U U U V V C E W P A P l e a s e " X " D A <input type="checkbox"/> AIR <input type="checkbox"/> SEA <input type="checkbox"/> LAND <input type="checkbox"/> ANY</p> <p>G E A M P Q O O A V C E O U A J U U V U A J O P V U Y A</p>
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<p>Name, organization, complete address, telephone and fax numbers or individual who will receive and be responsible for the imported material</p>	<p>Name and Address of producer/shipper</p>
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Provide the following information, as applicable: Animal species and tissue of origin of animal product, country of origin of the animal for which raw animal product was sourced, processing country, recombinant system and genetic inserts, antibody immunogenic, stabilizers, nutritive factors of animal origin in media

Estimate

Also, for animal pathogens or vectors, describe facilities/biosafety procedures

SPECIFY

processing/purification methods, including time at specific temperatures, pH, other treatments, disease safeguards, etc.

for VISA or MasterCard include number and expiration date

for VISA or MasterCard include number and expiration date

X U A J U T A T E H A
 C E U A G E E J A