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**OMB**  
**Approved**  
0579-XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**ANIMAL CARE**

## Confinement Agreement

The name and address of the person intending to import the dog(s) into the continental United States or Hawaii

The name and address of the person importing the dog(s) into the continental United States or Hawaii

The number of dogs to be imported and the breed, sex, age, color, markings, and other identifying information of each dog

The purpose of the importation

The port of embarkation and the mode of transportation

The port of entry in the continental United States or Hawaii

The proposed date of arrival in the continental United States or Hawaii

The name and address of the person to whom the dog(s) will be delivered in the continental United States or Hawaii and, if the dog(s) is or are imported for research purposes, the USDA registration number of the research facility where the dog will be used for research, tests, or experiments

Reason for confinement

Days in confinement

Signature

Date