**Revision**

***Import Permit Applications (42CFR 71.54)***

**(OMB Control No. 0920-0199) Expiration 01-31-2014**

| Form | Current Question/Item | Requested Change | Justification |
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| Application for permit  to import biological agents or vectors of human disease into the united states | Global change on form where it mentioned “Biological Agent(s)” | Global change on form where it mentioned “Biological Agent(s)” changed to “Infectious Biological Agent(s) or Vector(s)” | This change is necessary in order to correct grammatical error. |
| Application for permit  to import biological agents or vectors of human disease into the united states | “APPLICATION FOR PERMIT  TO IMPORT BIOLOGICAL AGENTS OR VECTORS OF HUMAN DISEASE INTO THE UNITED STATES” | “APPLICATION FOR PERMIT TO IMPORT INFECTIOUS BIOLOGICAL AGENTS INTO THE UNITED STATES” | This change is necessary in order to correct form to be consistent what material can be imported. |
| Application for permit  to import biological agents or vectors of human disease into the united states | For Section A, blocks requesting information about permittee’s contact information. | For Section A, revised by adding “permittee” in blocks requesting information about permittee’s contact information. | This change is necessary in order to correct grammatical error. |
| Application for permit  to import biological agents or vectors of human disease into the united states |  | For Section A, added blocks requesting information about secondary contact for Permittee. | This technical change is necessary in order for someone to provide information regarding the application in case the permittee is unavailable. |
| Application for permit  to import biological agents or vectors of human disease into the united states |  | “4. Scientific name of known/suspected biological agent(s) including Genus and species 5. Strain Designation (list “N/A” if not applicable) 6. Location 7. Laboratory or Storage (Select one or both) and 9. Person Responsible for Laboratory” | This technical change is where the imported material will be stored at the recipient facility and who would be responsible for this location |
| Application for permit  to import biological agents or vectors of human disease into the united states | “SECTION G, Receiving Laboratory Capabilities” | “SECTION G, Biosafety Measures” | This change is necessary in order to correct grammatical error. |
| Application for permit  to import biological agents or vectors of human disease |  | Added in Section G, “Has the permittee implemented biosafety measures commensurate with the hazard posed by the infectious biological agent, infectious substance, and/or vector to be imported, and the level of risk given its intended use?” | This technical change verifies that the permittee has implemented biosafety measures commensurate with the hazard posed by the infectious biological agent, infectious substance, and/or vector to be imported, and the level of risk given its intended use. |
| Application for permit  to import biological agents or vectors of human disease into the united states | For Section H, blocks requesting information about permittee’s contact information. | For Section H, revised by adding “permittee” in blocks requesting information about permittee’s contact information. | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | “APPLICATION FOR PERMIT TO IMPORT OR  TRANSPORT LIVE BATS” | “APPLICATION FOR PERMIT TO IMPORT OR TRANSFER LIVE BATS” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | “Read instructions before completing. Answer all items completely and type or print in ink. Let us know if you have already faxed your application. Use additional sheets if necessary. Complete and submit original signed application to: Centers for Disease Control and Prevention, Etiologic Agent Import Permit Program, 1600 Clifton Road NE, Mailstop A-46, Atlanta, GA 30333; Telephone: 404-718-2077; FAX: 404-718-2093.” | “Guidance for completing this form is available at http://www.cdc.gov/od/eaipp/importApplication/. This form may be submitted by mail, fax, or email attachment to the Centers for Disease Control and Prevention, Import Permit Program. Mailing Address: 1600 Clifton Road NE, Mailstop A-46, Atlanta, GA 30333. Fax: 404-718-2093. E-mail: ImportPermit@cdc.gov. Telephone: 404-718-2077.  Please submit completed form only once by either email, fax, or mail” | This change is necessary to make the instructions consistent for both application forms. |
| Application for permit to import or  transport live bats | For Section A, blocks requesting information about permittee’s contact information. | For Section A, revised by adding “permittee” in blocks requesting information about permittee’s contact information. | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats |  | For Section A, added blocks requesting information about secondary contact for Permittee. | This technical change is necessary in order for someone to provide information regarding the application in case the permittee is unavailable. |
| Application for permit to import or  transport live bats | In Section C, “Total or Maximum Number” | In Section C, delete “Maximum” from “Total or Maximum Number” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | For Section E, “ISOLATION AND CONTAINMENT FACILITIES AND TECHNICAL PERSONNEL” | For Section E, “BIOSAFETY MEASURES AND TECHNICAL PERSONNEL” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | For Section E, “Additional sheets attached)” | For Section E, deleted “Additional sheets attached)” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | For Section E, “1. Description of applicant 180- day quarantine laboratory facilities and equipment ( Additional sheets attached):  Biosafety level of 180-day quarantine facility (See instructions):   Biosafety level 1 Biosafety level 2 Biosafety level 3 Biosafety level 4” | For Section E, “1. Description of 180-day quarantinelaboratory facilities and equipment:  Animal Biosafety level (ABSL) of 180-day quarantine facility (*See instructions*):   ABSL1  ABSL2  ABSL3  ABSL4” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | For Section E, “2. Description of applicant post-quarantine housing ( Additional sheets attached):  Biosafety level of post-quarantine facility (See instructions):   Biosafety level 1  Biosafety level 2  Biosafety level 3  Biosafety level 4 | For Section E, “2. Description of post-quarantine housing:  Biosafety level of post-quarantine facility (*See instructions*):   ABSL1  ABSL2  ABSL3  ABSL4” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | For Section F, “APPLICANT (Print Name), SIGNATURE, TITLE, DEGREE(S)” | For Section F, “1. Permittee’s Signature (REQUIRED) and 2. Permittee’s Printed Name (Print name)” | This change is necessary in order to correct grammatical error. |
| Application for permit to import or  transport live bats | Guidance Document | Remove Guidance Document from form | This change is necessary in order to correct grammatical error. |