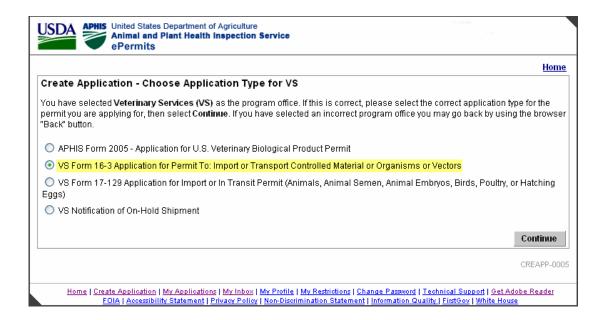
1.0 CREAPP-001: Create Application – Choose Program Office



1.1 CREAPP-005: Create Application – Choose Application Type for VS



1.2 CREAPP-0094: Select Agent Confirmation



<u>Home</u>

Select Agent Confirmation

Is this an application to import or transport a Select Agent?

No. This is NOT an application to import or transport Select Agents.

Yes. This is an application to import or transport Select Agents.

The following is a list of select agents and toxins which VS has considered select agents:

African horse sickness virus

African swine fever virus

Akabane virus

Avian influenza virus (highly pathogenic)

Bacillus anthracis

Bluetongue virus (exotic)

Botulinum neurotoxin producing species of Clostridium

Bovine spongiform encephalopathy agent

Brucella abortus Brucella melitensis Brucella suis Burkholderia mallei

Burkholderia pseudomallei

Camel pox virus

Classical swine fever virus Coccidioides immitis

Cowdria ruminantium (Heartwater)

Coxiella burnetii Eastern equine encephalitis virus Foot-and-mouth disease virus

Francisella tularensis

Goat pox virus

Hendra virus

Japanese encephalitis virus Lumpy skin disease virus Malignant catarrhal fever virus

(Alcelaphine herpesvirus type 1)

Menangle virus

Mycoplasma capricolum M. F38/M. mycoides capri

(contagious caprine pleuropneumonia)

Mycoplasma mycoides mycoides

(contagious bovine pleuropneumonia)

Newcastle disease virus (velogenic)

Nipah virus

Peste des petits ruminants virus

Rift Valley fever virus Rinderpest virus Sheep pox virus

Swine vesicular disease virus Venezuelan equine encephalitis virus Vesicular stomatitis virus (exotic)

Additional information regarding the USDA Select Agent Program can be found at:

http://www.selectagents.gov

Continue

CREAPP-0094

Home | Create Application | My Applications | My Permits/Responses | My Messages | My Shipments/Labels | Advanced Search | My Profile | Change |
Password | Technical Support | Compliance Responses | Get Adobe Reader
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CREAPP-0096: Select Agent Warning 1.3



<u>Home</u>

Select Agent Warning

At this time you may not submit an application, amendment or renewal request for a select agent using ePermits. Please fax or mail a completed paper VS 16-3 application to USDA APHIS VS NCIE:

USDA APHIS VS NCIE

4700 River Road

Unit 2, Mailstop 22, Cub. 1A07 Riverdale, MD 20737

If you have mistakenly answered the question incorrectly from the previous page please use the browser "Back" button to correct your answer.

CREAPP-0096

Home | Create Application | My Applications | My Permits/Responses | My Messages | My Shipments/Labels | Advanced Search | My Profile | Change Password | Technical Support | Compliance Responses | Get Adobe Reader FOIA | Accessibility Statement | Privacy Policy | Non-Discrimination Statement | Information Quality | FirstGov | White House

1.4 CREAPP-0042: Specify: New, Amendment or Renewal Application (Applicant View)

CREAPP-0039: Specify: New, Amendment or Renewal Application (APHIS View)

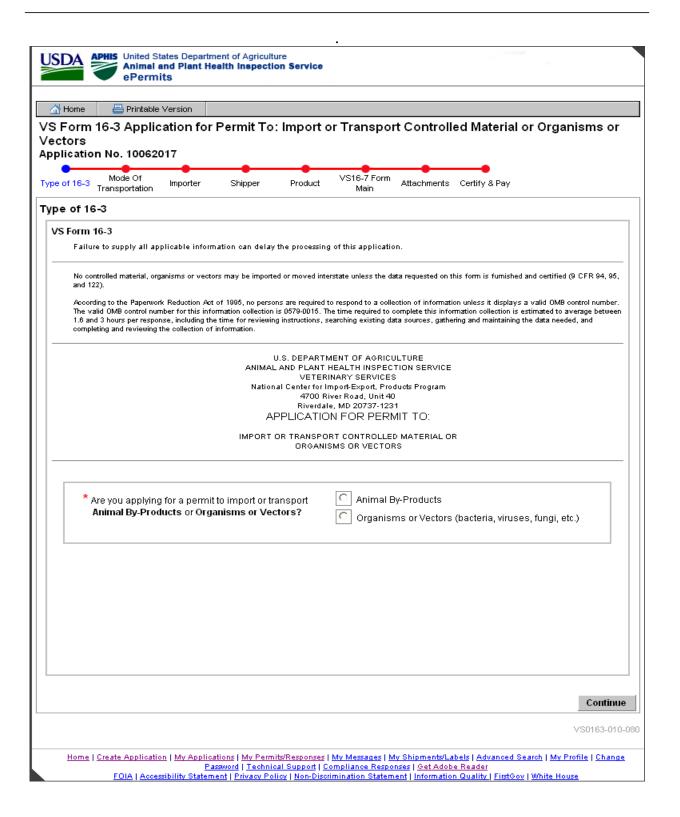
			<u>Home</u>
Specify: New, Ame	endment or Renewal Application		
*= required			
New Application	Amendment Application	Renewal Application	
	Select Permit: Select V Display Selected Permit		
	* or		
	Enter Permit Number if not found above:		
		Expiration Date:	
	*= required	Expiration Date	
	- 10401100		
			Continue
			conunue
			Conunue
	ication <u>My Applications My Permits/Responses My Messages My Password Technical Support Compliance Respon</u>	nses Get Adobe Reader	CREAPP-0042
FOIA	Password Technical Support Compliance Respon Accessibility Statement Privacy Policy Non-Discrimination Statement States Department of Agriculture and Plant Health Inspection Service	nses Get Adobe Reader	CREAPP-0042
DA APHIS United S	Password Technical Support Compliance Respon Accessibility Statement Privacy Policy Non-Discrimination Statement States Department of Agriculture and Plant Health Inspection Service	nses Get Adobe Reader	CREAPP-0042
DA APHIS United S Animal ePerm	Password Technical Support Compliance Respon Accessibility Statement Privacy Policy Non-Discrimination Statement States Department of Agriculture and Plant Health Inspection Service	nses Get Adobe Reader	CREAPP-0042 Profile Change louse
APHIS United S Animal ePerm	Password Technical Support Compliance Respon Accessibility Statement Privacy Policy Non-Discrimination Stateme States Department of Agriculture and Plant Health Inspection Service nits diment or Renewal Application	nses Get Adobe Reader ent Information Quality FirstGoy White H	CREAPP-0042 Profile Change louse
DA APHIS United S Animal ePerm	Password Technical Support Compliance Respon Accessibility Statement Privacy Policy Non-Discrimination Stateme States Department of Agriculture and Plant Health Inspection Service nits dment or Renewal Application Amendment Application	nses Get Adobe Reader	CREAPP-0042 Profile Change louse
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APHIS United S Animal ePerm	Password Technical Support Compliance Respon Accessibility Statement Privacy Policy Non-Discrimination Stateme States Department of Agriculture and Plant Health Inspection Service nits dment or Renewal Application Amendment Application	nses Get Adobe Reader ent Information Quality FirstGoy White H	CREAPP-0042 Profile Change louse
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1.5 CREAPP-0098: Permit Number Prefix will be Changed



1.6 VS0163-010-080: Type of 16-3

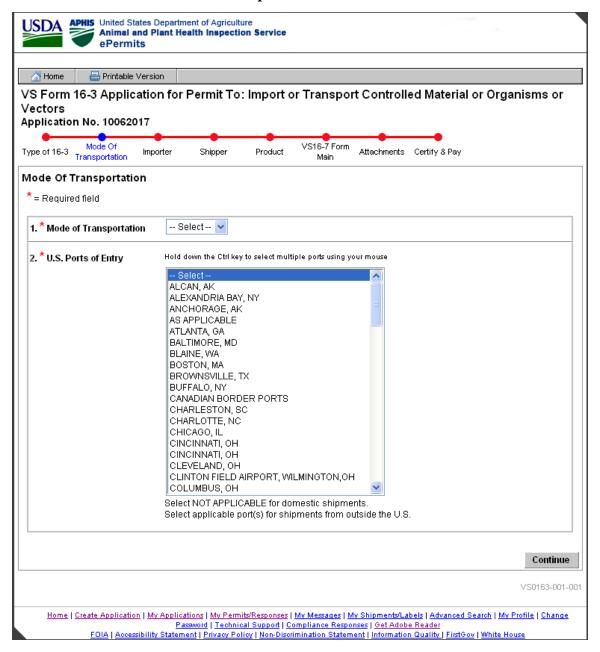


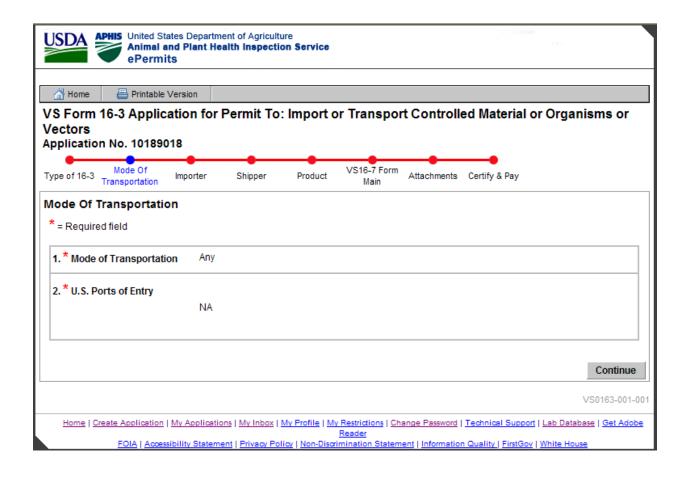


2.1	ePermits				
Home	E Printable Version				
Form 16-3 Application for Permit To: Import or Transport Controlled Material or Organisms or ectors					
	n No. 10189016				
-540.0	Mode Of London Chinasa Dadud VS16-7 Form Allahamada Cadifa & Barra				
e of 16-3	Mode Of Importer Shipper Product VS16-7 Form Attachments Certify & Pay Transportation Main Attachments Certify & Pay				
pe of 16	-3				
VS Form					
Failu	e to supply all applicable information can delay the processing of this application.				
No co and 12	ntrolled material, organisms or vectors may be imported or moved interstate unless the data requested on this form is furnished and certified (9 CFR 94, 92).				
The value of the v	ling to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. If the complete this information collection is 0579-0015. The time required to complete this information collection is estimated to average between 13 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and titing and reviewing the collection of information.				
	U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES National Center for Import-Export, Products Program 4700 River Road, Unit 40 Riverdale, MD 20737-1231 APPLICATION FOR PERMIT TO:				
	IMPORT OR TRANSPORT CONTROLLED MATERIAL OR ORGANISMS OR VECTORS				
* = Re	uired field				
	u want to apply for a permit to import or transport a <u>Select Agent?</u> No Pes				
For S	elect Agent applications only				
	The applicant must have pre-registered for Select Agent Individual Registration in the National Select Agent Registry (NSAR). Enter the NSAR Application Number below. Failure to provide the correct Application Number will delay the processing of this application.				
	NSAR Application No.:				
	* Also, is the application for a lab in the Laboratory Response Network(LRN)? No Yes				
	Contin				

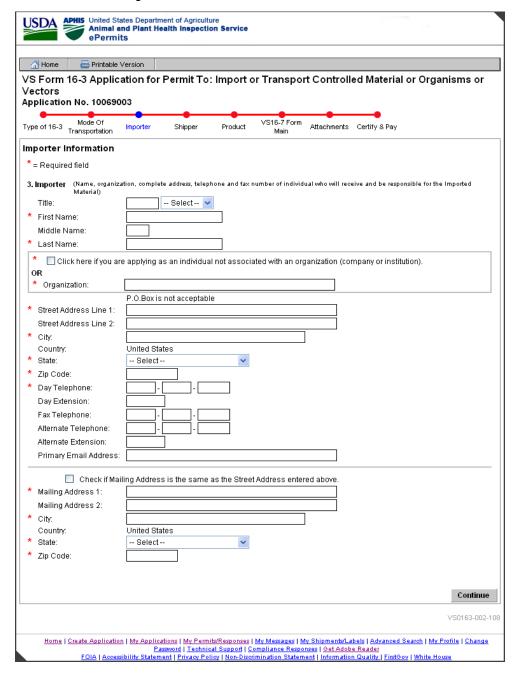
Figure 1: Type of 16-3: APHIS View after Selecting Yes for Select Agent [VS0163-010-080]

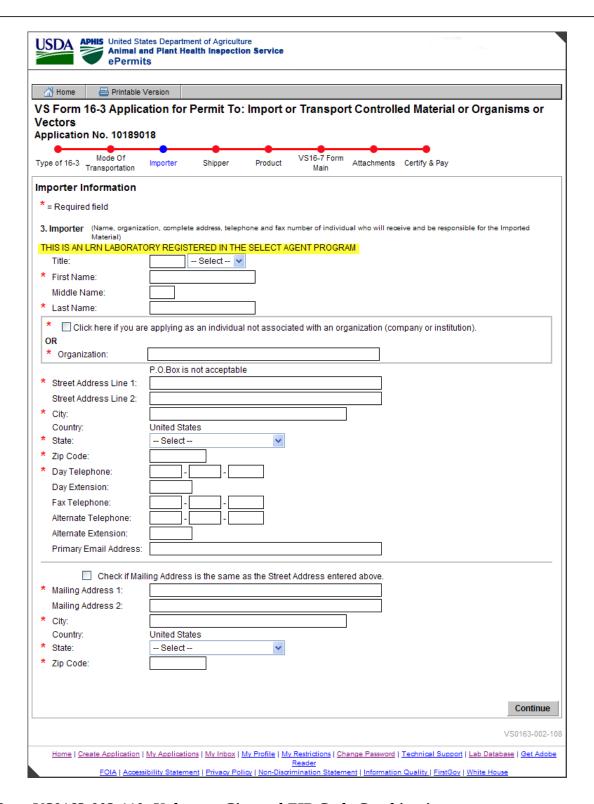
1.7 VS0163-001-001: Mode of Transportation



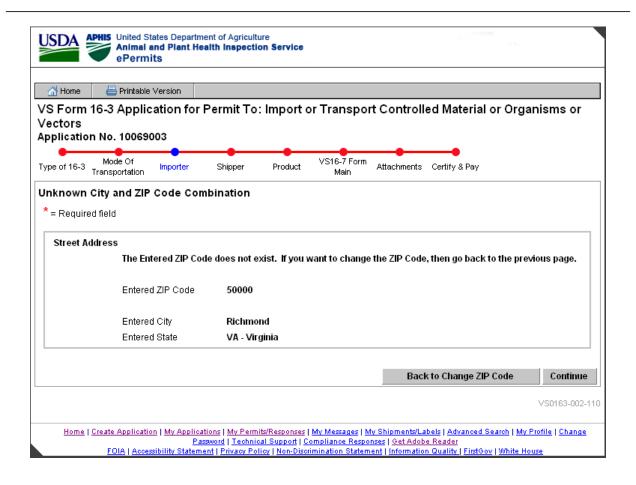


1.8 VS0163-002-108: Importer Information

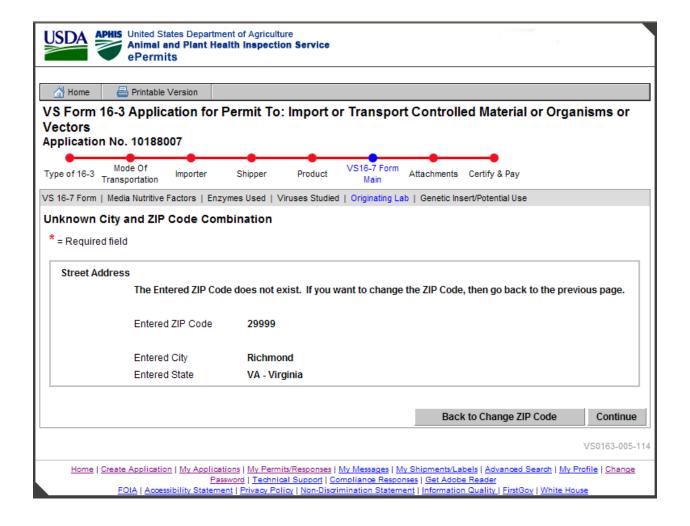




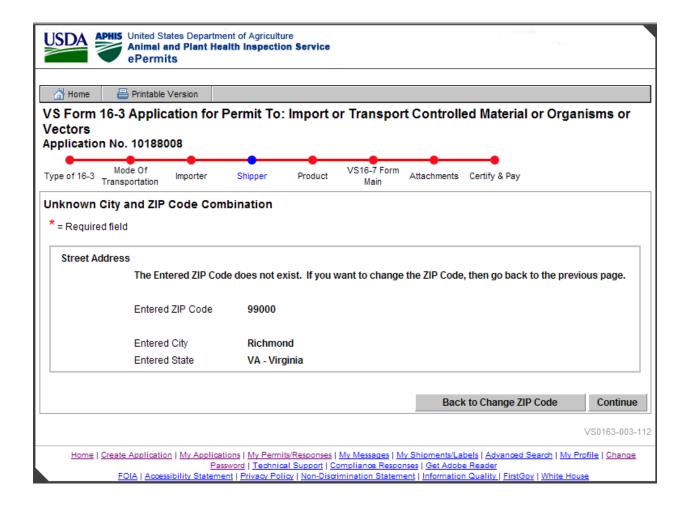
1.9 VS0163-002-110: Unknown City and ZIP Code Combination



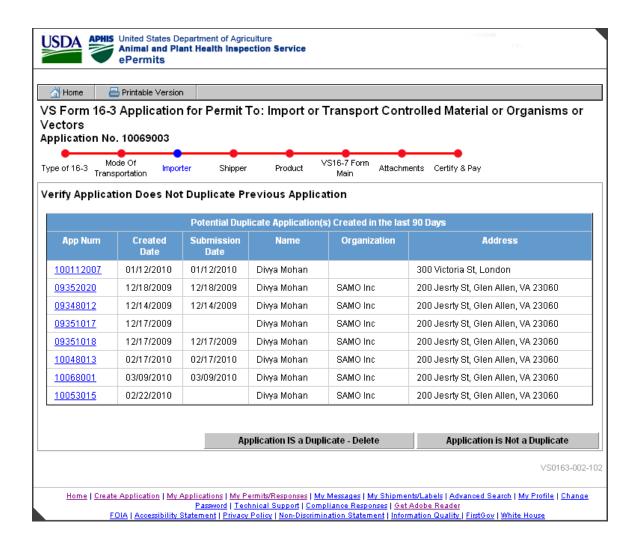
1.10 VS0163-005-114: Unknown City and ZIP Code Combination



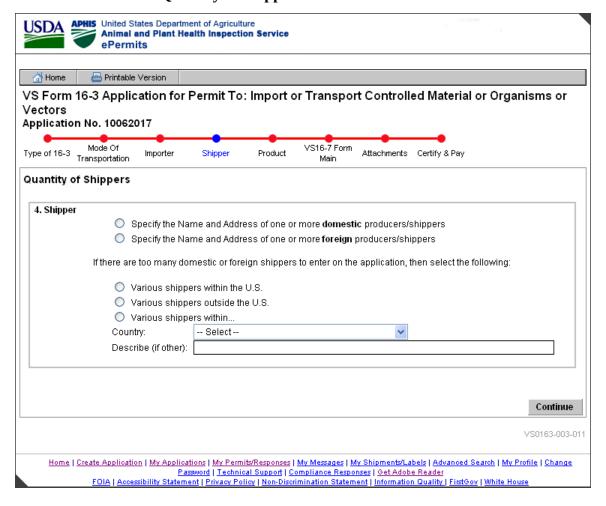
1.11 VS0163-003-112: Unknown City and ZIP Code Combination



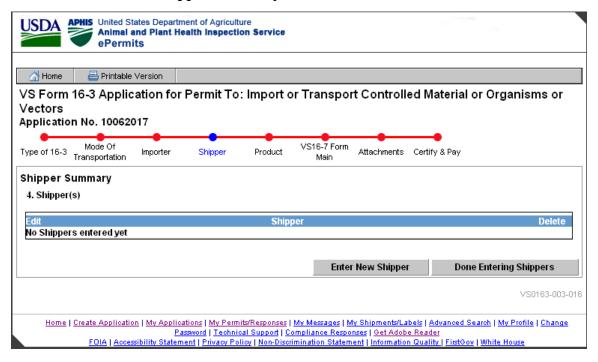
1.12 VS0163-002-102: Verify Application Does Not Duplicate Previous Application



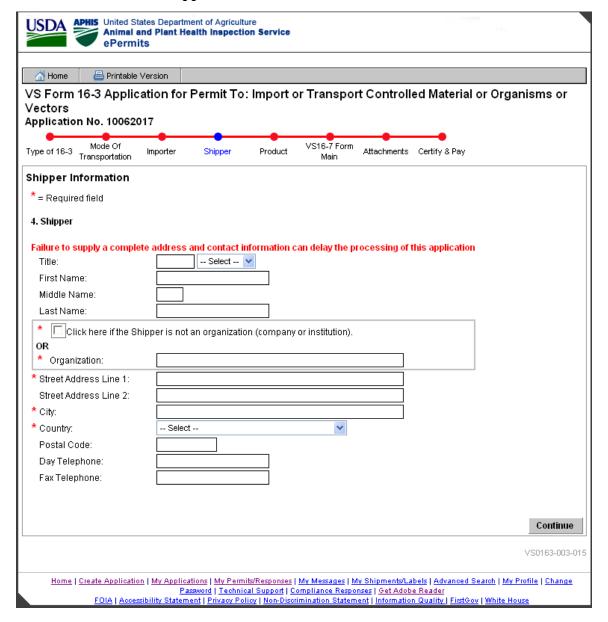
1.13 VS0163-003-011: Quantity of Shippers



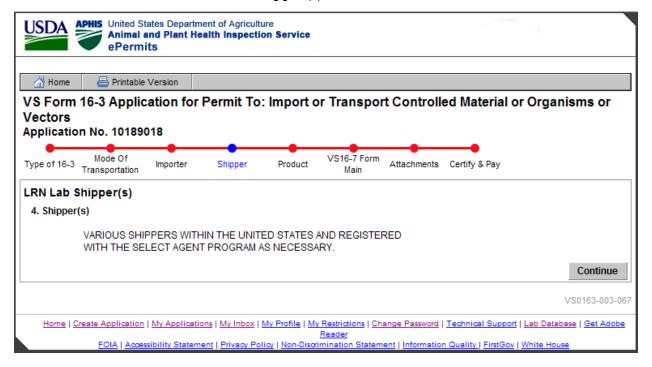
1.14 VS0163-003-016: Shipper Summary



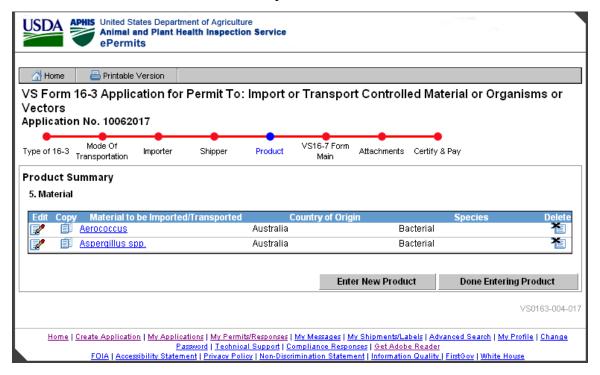
1.15 VS0163-003-015: Shipper Information



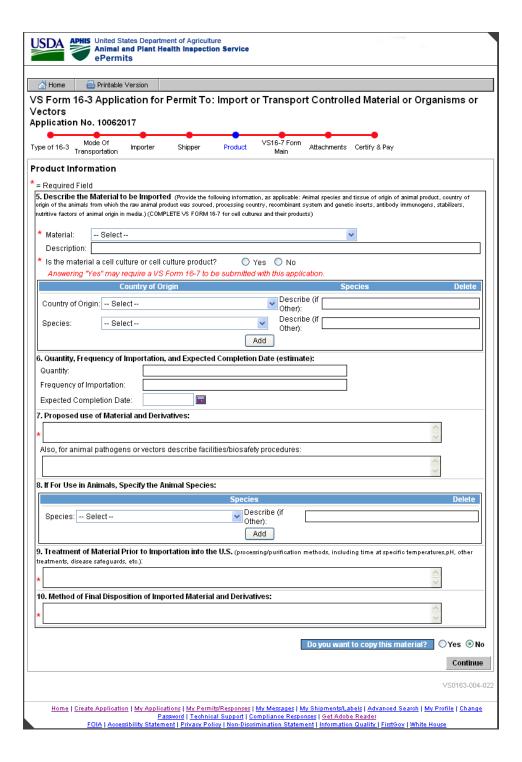
1.16 VS0163-003-067: LRN Lab Shipper(s)



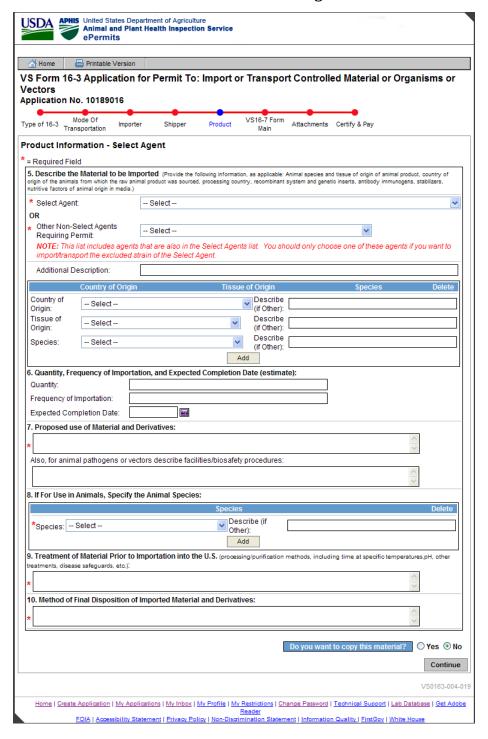
1.17 VS0163-004-017: Product Summary



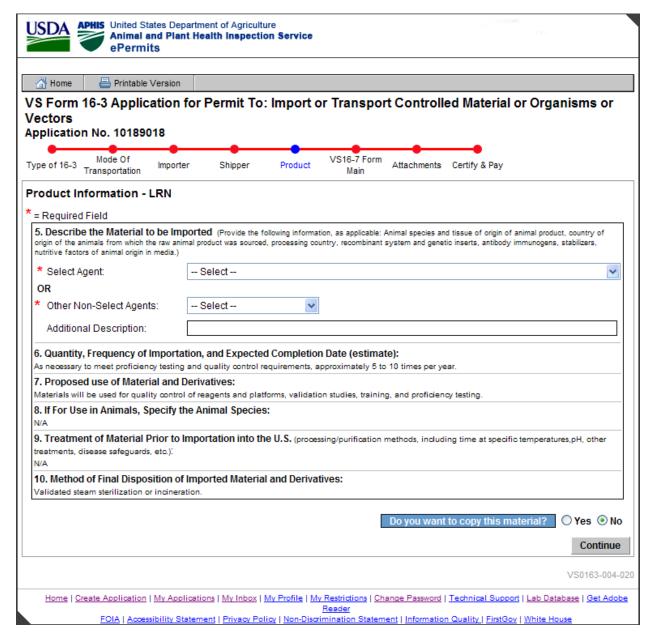
1.18 VS0163-004-022: Product Information



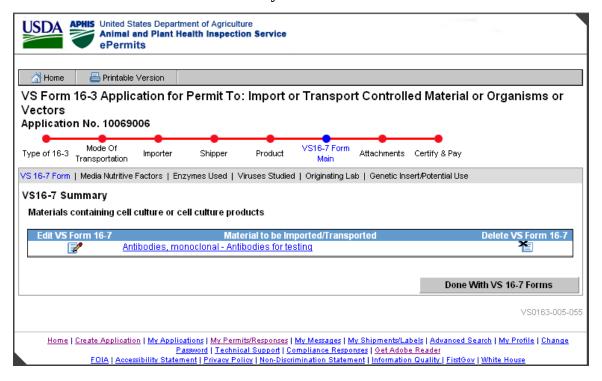
1.19 VS0163-004-019: Product Information – Select Agent



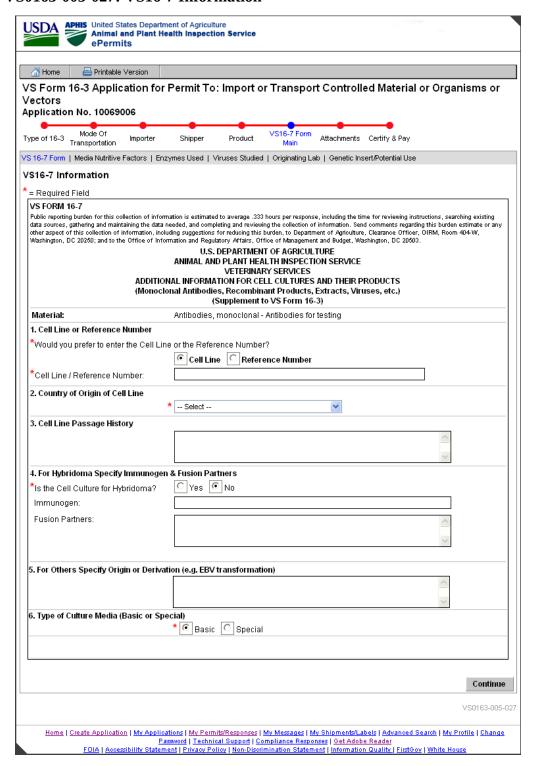
1.20 VS0163-004-020: Product Information – LRN



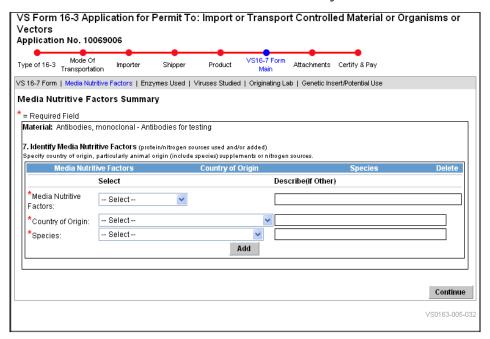
1.21 VS0163-005-055: VS16-7 Summary



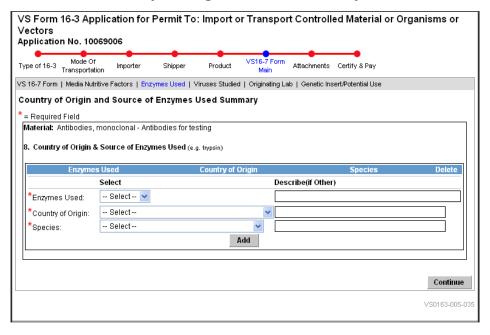
1.22 VS0163-005-027: VS16-7 Information



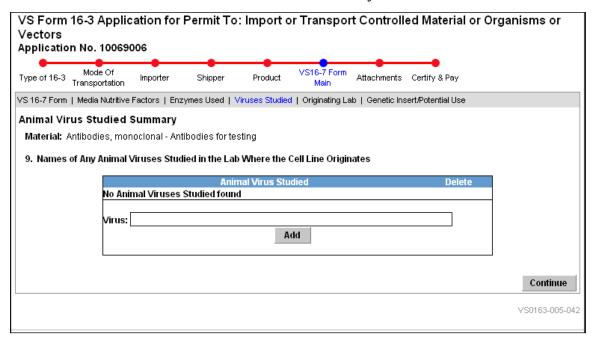
1.23 VS0163-005-032: Media Nutritive Factors Summary



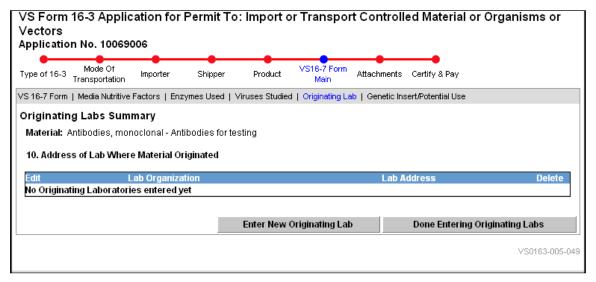
1.24 VS0163-005-035: Country of Origin and Source of Enzymes Used Summary



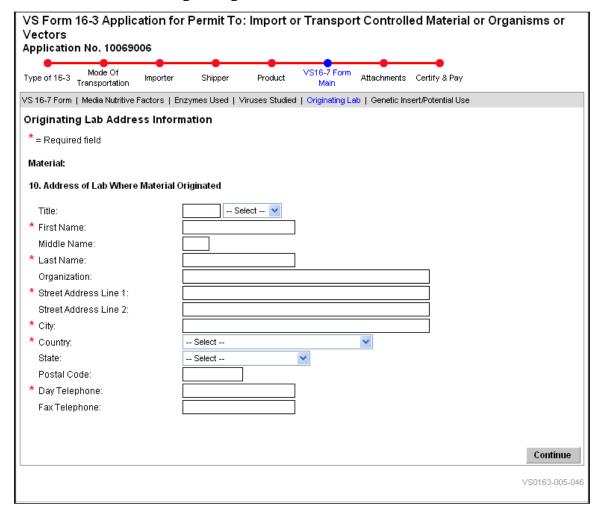
1.25 VS0163-005-042: Animal Virus Studied Summary



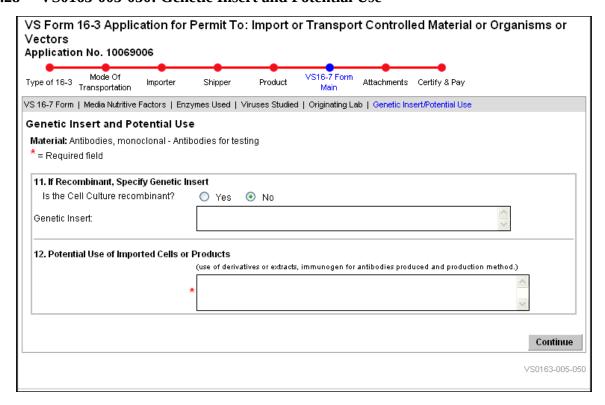
1.26 VS0163-005-049: Originating Labs Summary



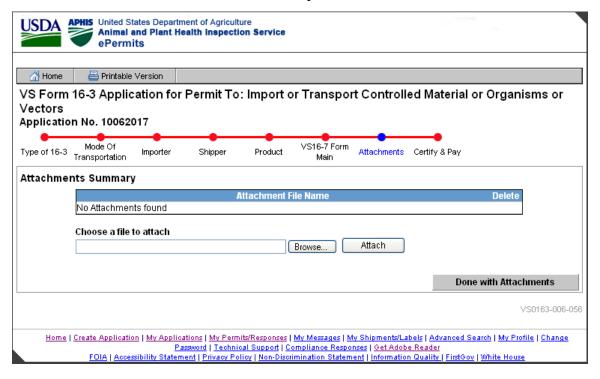
1.27 VS0163-005-046: Originating Lab Address Information



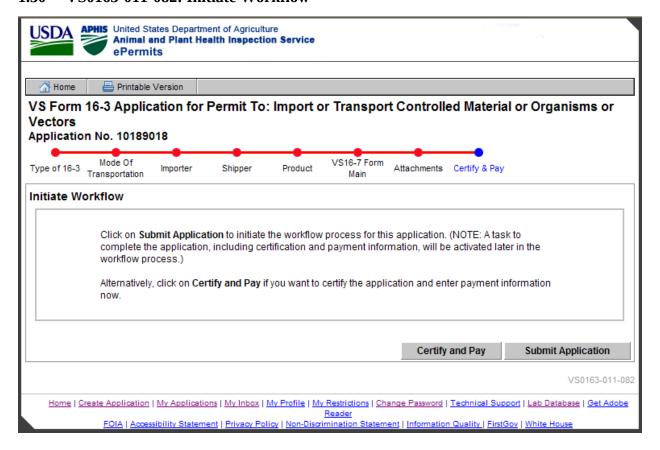
1.28 VS0163-005-050: Genetic Insert and Potential Use



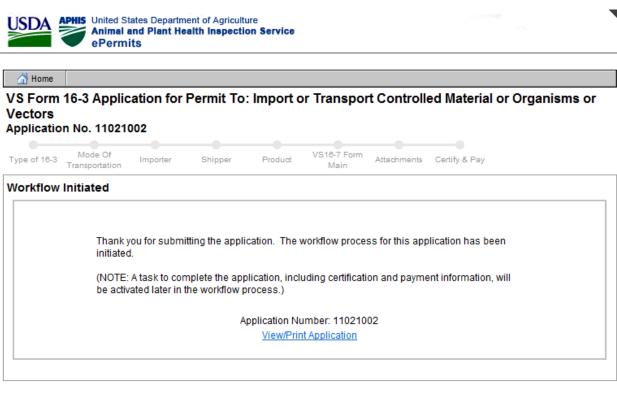
1.29 VS0163-006-056: Attachments Summary



1.30 VS0163-011-082: Initiate Workflow



1.31 VS0163-011-083: Workflow Initiated

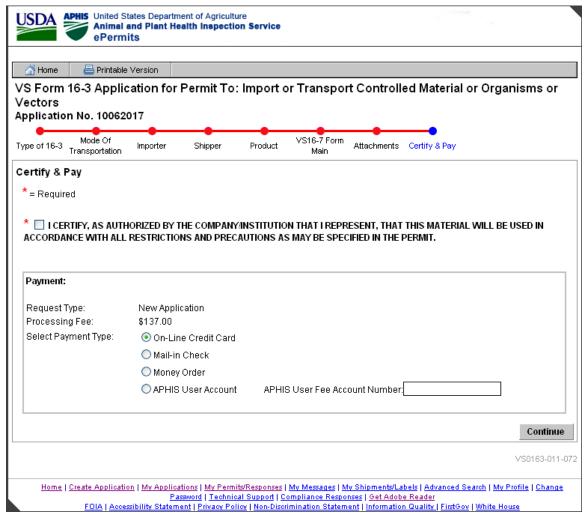


VS0163-011-083

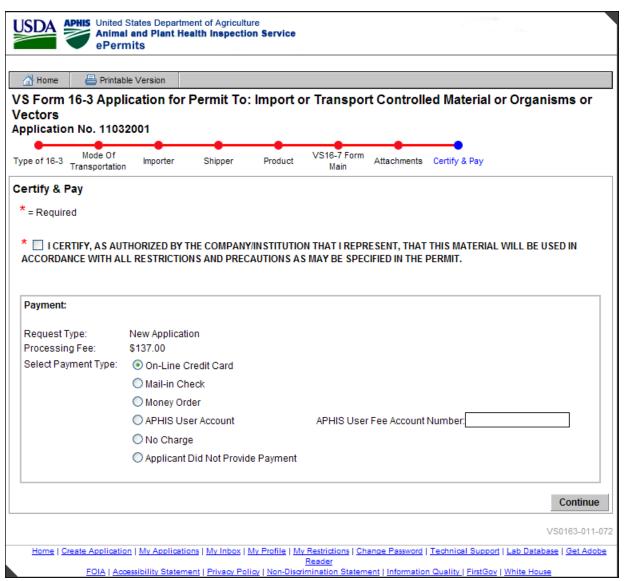
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1.32 VS0163-011-072: Certify & Pay

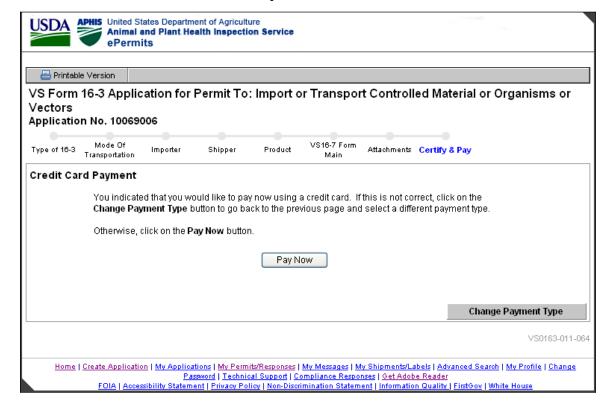


Certify & Pay Applicant View

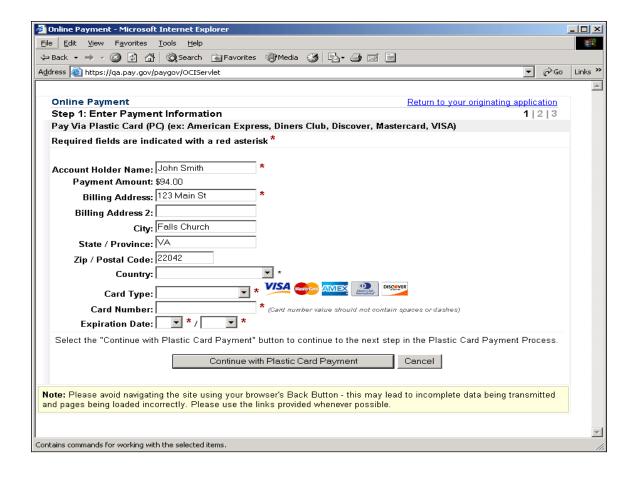


Certify & Pay APHIS View

1.33 VS0163-011-064: Credit Card Payment



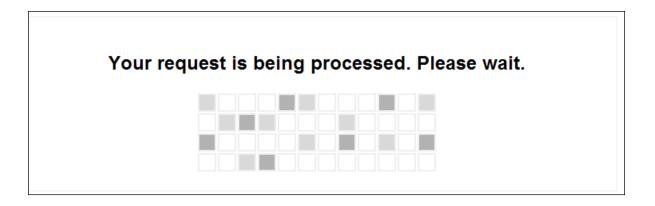
1.34 Online Payment: Step 1: Enter Payment Information

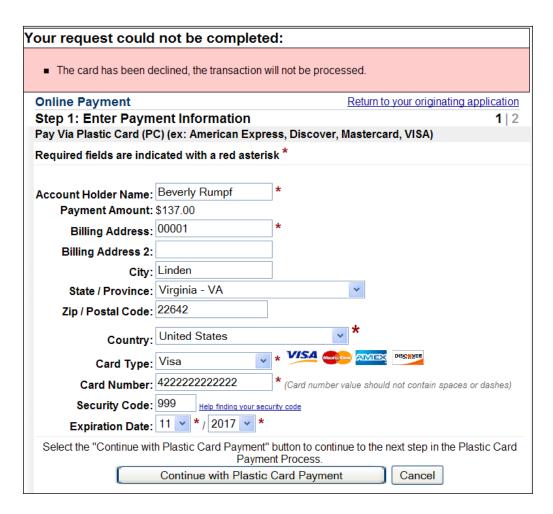


1.35 Online Payment: Step 2: Authorize Payment

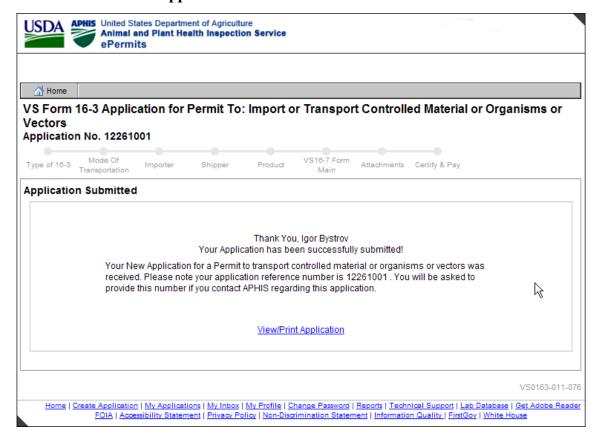
Online Payment	<u>Re</u>	Return to your originating application					
Step 2: Authorize Payment 1 2							
Payment Summary Edit this information							
Address Information	Account Information	Payment Information					
Account Holder Applicant	Card Type: Visa	Payment \$137.00 Amount:					
Name: Tester	Card Number: ********1111						
123 Main Billing Address: Street		Transaction 10/13/2010 Date and Time: 16:57 FDT					
Billing Address 2:		Date and Time. 10.37 ED1					
City: Reston							
State / Province: VA							
Zip / Postal Code: 20190							
Country: USA							
Email Confirmation Receipt							
To have a confirmation sent to you upon completion of this transaction, provide an email address and confirmation below.							
Email Address:							
Confirm Email Address:							
		Separate multiple email addresses					
CC:		with a comma					
Authorization and Disclosure							
Required fields are indicated with a red asterisk *							
I authorize a charge to my card account for the above amount in accordance with my card issuer							
agreement. ☑ *							
Press the "Submit Payment" Button only once. Pressing the button more than once could result in multiple							
transactions.							
Submit Payment Cancel							
Note: Please avoid navigating the site using your browser's Back Button - this may lead to incomplete							
data being transmitted and pages being loaded incorrectly. Please use the links provided whenever							
possible.							

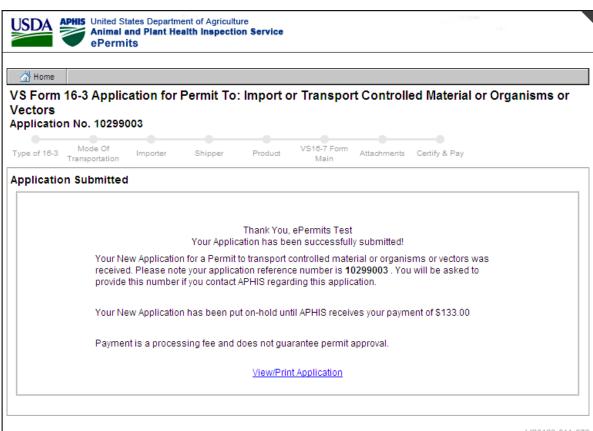
1.36 Online Payment: Your request is being processed. Please wait.





1.37 VS0163-011-076: Application Submitted





VS0163-011-076

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A Home

VS Form 16-3 Application for Permit To: Import or Transport Controlled Material or Organisms or Vectors

Application No. 10062017

Mode Of Type of 16-3 Transportation

Importer

Shipper

Product

VS16-7 Form Attachments Certify & Pay

Application Submitted

Thank You, Abhilash Mohan Your Application has been successfully submitted!

Your New Application for a Permit to transport controlled material or organisms or vectors was received. Please note your application reference number is 10062017. You will be asked to provide this number if you contact APHIS regarding this application.

Your New Application has been put on-hold until APHIS receives your payment of \$137.00

Please print this screen and send it with your check or money order to:

USDA APHIS Veterinary Services National Center for Import-Export, Products Program 4700 River Road, Unit 40 Riverdale, Maryland 20737-1231

Payment is a processing fee and does not guarantee permit approval.

View/Print Application

VS0163-011-076

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