No animals, animal semen, animal embryos, birds, poultry, or hatching eggs will be imported unless a completed application has been received (9 CFR Part 92 and 9 CFR Part 93).

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 0579-0040, 0579-0094, 0579-0165, 0579-0218, 0579-0224, 0579-0228, 0579-0245, 0579-0265, 0579-0301, 0579-0324, and 0579-XXXX. The time required to complete this information collection is estimated to average between .16 and 2 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 0579-0040, 0579-0094, 0579-0165, 0579-0218, 0579-0224, 0579-0228, 0579-0245, 0579-0265, 0579-0301, 0579-0324, and 0579-XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES				1. NAME AND ADDRESS OF SHIPPER IN COUNTRY OF ORIGIN			
APPLICATION FOR IMPORT OR IN TRANSIT PERMIT (Animals, Animal Semen, Animal Embryos, Birds, Poultry, or Hatching Eggs)							
INSTRUCTIONS TO IMPORTER: Complete and submit one copy to USDA, APHIS, VS, 4700 River Road, Unit 38, Riverdale, MD 20737. Prepare a separate application for each shipment.							
2. NAME AND ADDRESS OF IMPORTER (Include ZIP Code)				3. PORT OF EMBARKATION (From Canada show only for ocean vessel or airplane shipments)			
				4. COUNTRY FROM WHICH SHIPPED			
TELEPHONE NUMBER (Include Area Code)				5. MODE OF TRANSPORTATION (Name of airline or vessel and flight number)			
6. ANIMAL, ANIMAL SEMEN, ANIMAL EMBRYOS, BIRDS, POULTRY, OR HATCHING EGGS							
A. NO.	B. BREED		D.	DESCRIPTION (Sex, Age, Registered Name and No., Tattoo, Tag No., other Markings)			
E. PURPOSE OF IMPORTATION							
7. ROUTE OF TRAVEL INCLUDING ALL CARRIER STOPS ENROUTE (From Canada show route of travel only for ocean vessel or airplane shipment)							
8. PROPOSED SHIPPING DATE (From Canada show only for ocean vessel or airplane shipment) 9. PRO				POSED ARRIVAL DATE	10. UNITED STA	ATES PORT OF ENTRY	
11. NAME AND MAILING ADDRESS OF PERSON TO WHOM DELIVERY WILL BE MADE (After quarantine, when required) (Include ZIP Code)				12. WHERE DELIVERY WILL BI (After quarantine, when required)		NITED STATES	
TELEPHONE NUMBER (Include Area Code)							
13. REMARKS							
14. SIGNATURE	OF IMPORTER					15. DATE SIGNED	