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No zoo animals can be released from quarantine for movement to an approved zoological park unless this form is completed at the New York Port of Entry (9 CFR Part 93).

OMB APPROVED:
0579-0040
EXP. DATE
XX/XXXX

**UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES
POST ENTRY QUARANTINE RECORD OF ZOO ANIMALS**

1. VS FORM 17-30 NO.	2. PERMIT NO.
3. COUNTRY OF ORIGIN	
4. PORT OF EMBARKATION	

NOTE: Health Inspection on Reverse

INSTRUCTIONS: Please type or print. Signatures in ink only. VS Quarantine Station-Complete items 1 through 16 on all copies. Send yellow to Riverdale. Send pink, green, and white to Zoo. **Zoo Official-** Complete items 17 through 19 on all copies, send green and white to VS Field Station, retain pink. **VS Field Station-** Retain green and send white to Riverdale, MD office.

5. TATTOO	6. SPECIES (Description)	7. SEX	8. ESTIMATED YEAR OF BIRTH	9. CARRIER
10. IMPORTER (Name and address include ZIP Code)		11. PORT OF ENTRY		12. DATE OF ENTRY
		13. TERMINATION DATE OF QUARANTINE		14. DATE REMOVED FROM QUARANTINE STATION

15. DESTINATION - APPROVED ZOO (Name and address, include ZIP Code)	FOR USE BY VS RIVERDALE, MD OFFICE - Record of Transfer	
	20. APPROVED ZOO (Name and address, include ZIP Code)	25. APPROVED ZOO (Name and address, include ZIP Code)
16. ENDORSEMENT	21. ENDORSEMENT	26. ENDORSEMENT
17. DATE OF ARRIVAL AT ZOO	22. DATE OF ARRIVAL AT ZOO	27. DATE OF ARRIVAL AT ZOO
18. SIGNATURE OF RESPONSIBLE OFFICIAL	23. SIGNATURE OF RESPONSIBLE OFFICIAL	28. SIGNATURE OF RESPONSIBLE OFFICIAL
19. LOCATION IN PARK	24. LOCATION IN PARK	29. LOCATION IN PARK

DATE	PEN NUMBER	DATE	PEN NUMBER	DATE	PEN NUMBER

PERIODIC HEALTH INSPECTION

(Inspections to be made at least every 6 months - type or print data, sign in ink)

DATE	REMARKS	SIGNATURE <i>(Examining Veterinarian)</i>

COPY DESIGNATIONS
LOWER RIGHT CORNER
IN BLACK INK

PART 1 - AREA OFFICE, RIVERDALE, MD

PART 2 - ZOO

PART 3 - RIVERDALE, MD OFFICE

PART 4 - VS AREA OFFICE