unless it displays a 0579-0393. The tim	perwork Reduction Act of 1995, an agency may not conduct or sponsor, and valid OMB control number. The valid OMB control numbers for these in the required to complete this information collection is estimated to average between the complete this information and maintaining the data needed, and complete the control of the	ormation collection ween .16 and 1 he	ns are 0579-0040, 0579-0218, 0579-0228, and burs per response, including the time for reviewing	OMB APPROVED 0579-0040, 0218, 0228, and 0393
		1. PORT OF ARR		2. DATE OF ARRIVAL
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES  DECLARATION OF IMPORTATION  (Animals, Animal Semen, Animal Embryos, Birds, Poultry, or Hatching Eggs)		3. IMPORT PERMIT NUMBERS		
		4. COUNTRY OF ORIGIN OF HEALTH CERTIFICATE  5. PORT OF EMBARKATION (city, country)		
<b>INSTRUCTIONS:</b> Importer, owner, or authorized agent shall complete an original and one copy, which shall be presented to Collector of Customs, at port of arrival for appropriate distribution.		6. CARRIER AND VESSEL OR FLIGHT NUMBER		
7. NAME AND ADDRESS OF IMPORTER (include ZIP code)		8. NAME AND A	ODRESS OF BROKER (if any) (include ZIP code and te	lephone number)
9. ANIMALS, ANIMA	AL SEMEN, ANIMAL EMBRYOS, BIRDS, POULTRY, OR HATCHING EGGS			
A. NUMBER	B. COMMON NAME (for domestic livestock or poultry, show breed and species)	SEX (when it can be determined)	D. PURPOSE OF IMPORTATIC (dairy, feeding, grazing, breeding, racing, pleasure, sl hatching, exhibition, propagation, medical, scien	aughter, special breeding*,
10. NAME AND ADDRESS OF DESTINATION AFTER RELEASE (include ZIP code)		REMARKS		
I hereby request quarantine or inspection service and agree to reimburse Veterinary Services or pay in advance for the cost thereof, as may be required, and waive all claim against Veterinary Services or their employees for damages which may arise from such service.				
The undersigned hereby certifies that the foregoing declaration is true and correct.  11. EXECUTED BY (Signature)		-		
12. TYPE OR PRINT NAME AS SIGNED IN ITEM 11				
13. TITLE	14. DATE	1		
□ Authorized Agent □ Owner □ Importer				