**CDC Notification of Proposed Nonhuman Primate (NHP) Importation to the United States**

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| **Section 1: Importer’s Contact Information** | | |
| *Date of CDC Notification: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_*  *M M D D Y Y Y Y* | |  |
| *CDC-registered importer name:* | |  |
| *Importer address:* | |  |
| *Primary contact for this shipment:* | *Name:* |  |
| *Phone number:* |  |
| *Email:* |  |
|  | | |
| ***Section 2. Quarantine Facility (If Different from Importer)*** | | |
| *Name/Institution:* | | |
| 1. *Address:* | | |
| |  | | --- | | ***Section 3: Animal Information*** | | *Species being imported:* | | *Number of animals being imported:* | | *Means of individually identifying NHPs (tattoo, microchip, etc. ):*  *Please submit individual NHP ID numbers to* [*NHPImporters@cdc.gov*](mailto:NHPImporters@cdc.gov) *within five (5) business days of arrival at quarantine facility.* | | *NHPs were:  Captive bred  Wild caught* | | *NHP country of origin:* | | | |

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| ***Section 4: Proposed Purpose of Importation*** |
| *Your request must be limited to scientific, exhibition, or educational purposes.* |
| ***Purpose***  *Scientific  Exhibition  Educational* |

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| ***Section 5. Shipper/Exporter*** *(Consignor)* | |
| *Name/Institution:* | |
| *Address:* | *Street:* |
| *City:* |
| *State/Province:* |
| *Country:* |
| 1. *Phone number:* | |
| 1. *Email:* | |

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| ***Section 6. Broker*** | |
| *Broker:* | |
| *Address:* | |
| *Phone number:* | |
| *Email:* | |
| *Primary contact for this shipment* | *Name:* |
| *Phone number (if different from above):* |
| *Email (if different from above):* |

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| ***Section 7: Transportation Information*** | |
| ***Arrival Method (Complete the Applicable Section Below)*** | |
| *Arrivals by flight:* | *Port of Entry:\** |
| *Carrier(s):* |
| *Flight Number(s):* |
| *Arrival flight number:* |
| *Arrival Air Waybill Number(s):* |
| *Detailed itinerary/flight route (including technical stops):* |
| *Estimated date and time of arrival in United States:* |
| *Arrivals by vehicle:* | *Port of entry:\** |
| *Name of vehicle owner:* |
| *License plate number:* |
| *Estimated date and time of arrival in United States:* |
| *Arrival by ship:* | *Port of entry:\** |
| *Name of ship:* |
| *Vessel number:* |
| *Estimated date and time of arrival in United States:* |
| ***Crates*** | |
| *Number:* |  |
| *Description:* |  |
| ***Offloading NHPs at Port of Entry (If Applicable)*** | |
| *Person(s) responsible for off-loading NHPs at U.S. port of entry:* | *Name(s):* |
| *Address:* |
| *Phone number:* |
| *Email:* |
| ***Ground Transport*** | |
| *Party responsible for transporting NHPs from port of entry to quarantine facility:* | *Name of transport company:* |
| *Names of individuals transporting shipment:* |
| *Address:* |
| *Phone number:* |
| *Email:* |
| *Second party responsible for transporting NHPs from port of entry to quarantine facility (if applicable):* | *Name of transport company:* |
| *Names of individuals transporting shipment:* |
| *Address:* |
| *Phone number:* |
| *Email:* |
| |  |  | | --- | --- | | ***Section 8. Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES) Permit*** | | | *CITES permit number(s):* | *CITES permit expiration date(s):* | |  |  | |  |  | |  |  | |  |  | | |

**Please email completed form to** [**NHPImporters@cdc.gov**](mailto:NHPImporters@cdc.gov) **at least seven days prior to shipment arrival.**

**\*** **An importer may import live NHPs into the United States only through a port of entry where a HHS/CDC quarantine station is located. The list of current HHS/CDC quarantine stations can be found at** [**Quarantine Station Contact List, Map, and Fact Sheets | Quarantine | CDC**](https://www.cdc.gov/quarantine/quarantinestationcontactlistfull.html)***.***

**(2) In the event that the importer is unable to provide for entry at a port where a HHS/CDC quarantine station is located, the importer may only import live NHPs into the United States through another port of entry if the Director provides advance written approval.**