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 92 and 9 CFR

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, -0055, -0218, -0228, -0245, and -0473. 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, authering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved 0579-0040, -0055, -0218, -0228, -0245, and -0473

received (9 CFR and Part 93).	Part 92 and 9 CFR gath	response, including the nering and maintaining the dat	time for re a needed, and co	ompleting and reviewing the collection of	sxisting data sources, f information.	
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES 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)				1. NAME AND ADDRESS OF SHIPPER IN COUNTRY OF ORIGIN		
				3. PORT OF EMBARKATION (from Canada, show only for ocean vessel or airplane shipments)		
				4. COUNTRY FROM WHICH SI	HIPPED	
TELEPHONE NUMBER (include area code)				5. MODE OF TRANSPORTATION (name of airline or vessel and flight number)		
6. ANIMAL, AN	IIMAL SEMEN, ANIMA	AL EMBRYOS, BIRDS, PO	OULTRY, OR	HATCHING EGGS		
A. NO.	B.	B. C. SPECIES D		DESCRIPTION (sex, age, registered name and number, tattoo, tag number, other markings)		
E. PURPOSE C	OF IMPORTATION					
7. ROUTE OF 1	TRAVEL INCLUDING	ALL CARRIER STOPS EI	NROUTE (from	Canada, show route of travel only for ocea	n vessel or airplane shipment)	
8. PROPOSED SHIPPING DATE (from Canada, show only for ocean vessel or airplane shipment) 9. PRO			essel 9. PRC	POSED ARRIVAL DATE	10. UNITED STATES PORT OF ENTRY	
ог априте упртеп	9					
11. NAME AND MAILING ADDRESS OF PERSON TO WHOM DELIVERY WILL BE MADE (after quarantine, when required) (include ZIP code)				12. WHERE DELIVERY WILL (after quarantine, when required) (local	BE MADE IN THE UNITED STATES	
	4	7. , (
TELEPHONE NUMBER (include Area code)						
13. REMARKS						
14 SIGNATUR	E OF IMPORTER				15. DATE SIGNED	
C.GRATOR	_ J JIVIEN				io. Date dones	