



CDC NOTIFICATION OF PROPOSED NONHUMAN PRIMATE (NHP) IMPORTATION TO THE UNITED STATES

SECTION 1: IMPORTER'S CONTACT INFORMATION

Date of CDC Notification: _____

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: _____

Address: _____

SECTION 3: ANIMAL INFORMATION

Species being imported	Number of animals being imported
1.	
2.	
3.	
4.	

Means of individually identifying NHPs (tattoo, microchip, etc.):

Please submit individual NHP ID numbers as a Microsoft Excel spreadsheet to NHPImporters@cdc.gov within five (5) business days of arrival at quarantine facility.

NHPs were: Captive bred Wild caught NHP country of origin: _____

SECTION 4: PROPOSED PURPOSE OF IMPORTATION

Your request must be limited to scientific, exhibition, or educational purposes.

Purpose: Scientific Exhibition Educational

SECTION 5. SHIPPER/EXPORTER (CONSIGNOR)

Name/Institution: _____

Address:

Phone number: _____ Email: _____

Public reporting burden of this collection of information is estimated to average 15 minutes 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. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329; ATTN: PRA (0920-1383).

SECTION 6. BROKER

Broker: _____

Address: _____

Phone number: _____ Email: _____

Primary contact for this shipment

Name: _____ Phone number: _____

Email: _____

SECTION 7: TRANSPORTATION INFORMATION**Arrival Method** *(Complete the Applicable Section Below)*

* 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](#). **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.**

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):

Additional Information:

Please email completed form to NHPImporters@cdc.gov at least seven days prior to shipment arrival.

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR PREVENTION SERVICES
DIVISION OF QUARANTINE (E03)
ATLANTA, GEORGIA 30333