MINISTRY OF AGRICULTURE

VETERINARY SERVICES

THE PINE, ST MICHAEL BB 11091

BARBADOS

**TEL. NOS: (246) 535-0220/535-0221 FAX. NO: (246) 535-0236 E-Mail: vetservices@agriculture.gov.bb**

**APPLICATION FOR A PERMIT TO IMPORT DOGS AND CATS**

|  |  |
| --- | --- |
| ***IMPORTER DETAILS***  | ***EXPORTER DETAILS***  |
| **NAME:**  | **NAME:**  |
| **ADDRESS** *(IN BARBADOS* **- REQUIRED***)***:**   | **ADDRESS:**   |
| **PHONE: MOBILE:** **E-MAIL:**  | **COUNTRY OF EXPORT:**  |

|  |
| --- |
| ***DESCRIPTION OF ANIMAL(S)***  |
| **SPECIES**  | **BREED**  | **AGE**  | **M/F**  | **MICROCHIP NUMBER**  |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| ***INTENDED USE:*** PET  |   |  BREEDING WORKING SERVICE OTHER |  |  |

|  |
| --- |
| ***ADDITIONAL INFORMATION\****  |
| **AIRLINE/VESSEL: FLIGHT NUMBER:**  |
| **EXPECTED DATE and TIME OF ARRIVAL:**  |
| ***CUSTOMS BROKER DETAILS***  |
| **NAME: PHONE:**  |

***\*****If not available when applying for the permit, the following information must be submitted no less than three*

*(3) working days prior to the animal’s arrival.*

**PLEASE NOTE: *The conditions under which animals are permitted entry into Barbados are subject to change at short notice, depending on the animal disease status of the country from which they are being imported.***

# AGREEMENT

I/We the undersigned declare all information provided on this application is true to the best of my/our knowledge and agree to comply with the issued Import Conditions should the application be approved.

**NAME (In block letters):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application Fee: $25.00**

FOR OFFICE USE ONLY

**Application approved: No**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Yes**  **Permit Number issued: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**