## **Department of Animal Production and Health**Please type or write clearly in BLOCK letters

Cor Office use only   Application For Permit to Import Domestic Canine (Dogs) and Feline (Cats) Animals.		se type of write clearly in block letters.
Name and Address of Importer:  Domestic Canine (Dogs) and Feline (Cats) Animals.  Animal Diseases Act. No.59 of 1992  Reference No:	Importer	(For Office use only)
Passport No: National Identity Card No: Telephone & Fax No: Exporter / Consignee:  Passport Number: Name and Address of Consignee:  Passport Number: National Identity Card No: Exporter / Consignee  Export Details  Country of Origin: Expected date of export: Port of embarkation: Route of Transport (Air/Sea): Flight No: Expected Date of Arrival: Expected Date of Arrival: Port of disembarkation:  Description of Animals Females Males  Nicrochip No. Age or Date of Birth  Microchip No. Age or Date of Birth		Application For Permit to Import
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Quarantine History (i	f known)
Has the Animal been in export?	an Official Quarantine Premise or in a `restricted entry" area in the country of
Yes	No
If 'Yes' the Quarantine prelease)	period was from (Date of entry) to: (Date of

Issued No: 1 Date 01.01.2013 Rev: 00 Revised Date: 00 FO/ VRA/1

## **Agreement:**

Director General, Department of Animal Production & Health, Peradeniya.

I hereby agree:

- To adhere to conditions stipulated by the Department of Animal Production & Health (DAPH) in respect to importation of Domestic and Wild Animals into Sri Lanka;
- To forward the Original International Animal Health Certificate, Original Blood test reports, Vaccination and Parasitic treatment Records at the time of entry conforming to Health requirements stipulated by the DAPH;
- To quarantine these animals for maximum 3 days at the Quarantine Station and allow authorized officers of the DAPH to examine and to take samples for necessary laboratory examination and to detain the animal at importer's premises for 30 days;
- To inform Director General, Animal Production & Health on any diseases/ deaths among imported animals;
- To follow any other terms and conditions as may be stipulated by the DAPH from time to time.

## **DECLARATION**

I declare that to the best of my knowledge and belief all the above information is true and correct.
(Signature and Name of Applicant)
Date: