

**APPLICATION TO IMPORT LIVE ANIMALS INTO THE REPUBLIC OF SEYCHELLES**

1. Please complete this form fully, in PRINT, prior to the return thereof.
2. Import permits are valid for a limited period and one consignment only.
3. **Imports may only be authorized in writing by issuing a veterinary import permit.**
4. Application for a permit must be made at least **four MONTHS (rabies infected countries) and four WEEKS (rabies free countries)** prior to entry. (SPECIES SPECIFIC)
5. Applicants are advised to phone the veterinary services if the permit has not been received two weeks after the application was submitted.
6. It is the responsibility of the importer to read and comply with the conditions on the veterinary import permit.
7. After completion, return to Chief Executive Officer of National Biosecurity Agency.....
8. Original veterinary certificates must be available at the port of entry only and need not accompany this application unless specifically requested.
9. In the case of CITES species, certified copies of the CITES permit must accompany the application.

**A. IF APPLICATION IS MADE BY AN AGENT ON BEHALF OF AN IMPORTER**

1.Full name of agent			
2.Adress of Agent			
3.Contact number		email	
4.Attach proof in the form of the signed letter (on the importer’s letterhead where applicable) stating a) that you are authorized to apply on behalf of the importer AND b) that the importer agrees to be bound to all the terms and conditions of this application as well as any permissions , permit or authorizations issued as a results thereof			
<b>NO APPLICATION WILL BE CONSIDERED WITHOUT SUCH CONFIRMATION BEING ATTACHED</b>			

**B. IMPORTER PERSONAL DETAILS**

1. Name and Surname	
2. Postal Address	
3. Telephone no.	
4. Email	
5. Mobile number/s	

C. IMPORT DETAILS

1. Number and species of animals to be imported	
2. The country and area of origin	
3. Port /airport of loading	
4. transit airport/port if applicable	
5. Purpose for which the animals are to be imported	
Full address of final destination in the Seychelles where animal(s) will be kept	

C. I PET DETAIL(S)

NAME	
SPECIES	
BREED	
SEX	
D.O.B/ AGE	
DESCRIPTION	
MICROCHIP NUMBER	

By attesting my signature hereto, I-

- a. declare that what I have stated or provided in this application is correct at the time of application is made
- b. Understand that any false or misleading information provided may result in prohibition of import, penalty or could lead to my prosecution and/ or legal action taken against me.
- c. Realize that if in the opinion of the Agency I am wilfully providing false or misleading information this may be taken into consideration when considering future applications.
- d. The permit is not transferable and cannot be used by any other importer except the importer specified on the permit.

Signature

Date