



**APPLICATION FOR A LICENCE TO
IMPORT LIVE ANIMALS AND ANIMAL PRODUCTS**

CONTACT DETAILS

1. Name, address and contact details of the person/company undertaking importation:

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|----------|
| Postcode |
| Tel: |
| Email: |

2. Name of person and Bailiwick destination address of premises if different to 1:

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|----------|
| Postcode |
| Tel: |
| Email: |

3. Name and address of applicant to which Licence or Permit is to be sent if different to 1:

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|----------|
| Postcode |
| Tel: |
| Email: |

4. Address of premises of origin (last location where animal/products held outside of the Bailiwick):

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|----------|
| Postcode |
| Tel: |
| Email: |

ANIMAL(S) / ANIMAL PRODUCTS

Description of animal(s) / products to be imported:

| Number | Species (Common name and/or scientific name) | Description to include as appropriate age and sex, breed, colour, height and identification (e.g. sketch, photo, microchip, ear tag, ring, brand, provenance.) |
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| | | |

IMPORTATION PURPOSE

(Please tick a box)

- | | | |
|------------------------------------|---|---|
| <input type="checkbox"/> Livestock | <input type="checkbox"/> Pet | <input type="checkbox"/> Personal Consumption |
| <input type="checkbox"/> Trade | <input type="checkbox"/> Exhibition/Sport | <input type="checkbox"/> Other |



TRAVEL ARRANGEMENTS

Date of Importation:

Time of Arrival:

By Air

Airport of Departure:

Airline and Flight Number:

By Sea

Port of Departure:

Ferry Company:

Vehicle Registration Number or Foot Passenger:

Signature of Applicant:

Date of Application:

Completed applications should be returned to:

The Office of Environmental Health and Pollution Regulation
Burnt Lane House
Longue Rue
St Martins
GY4 6LD

Tel: +44 (0) 1481 221161
Email: svo@gov.gg