



DEPARTMENT OF AGRICULTURE
 VETERINARY SERVICES UNIT
 DARVILLE'S COMPLEX, GLADSTONE & MUNNINGS ROADS,
 NASSAU, N.P., THE BAHAMAS
 Telephone: 1(242)-397-7450/1 Fax: 1(242)-325-3960
 9Website: www.bahamas.gov.bs/agriculturemarine

APPLICATION FOR PERMIT TO IMPORT DOMESTIC ANIMALS*
INTO THE COMMONWEALTH OF THE BAHAMAS

(PLEASE PRINT CLEARLY AND COMPLETE THE ENTIRE FORM TO PREVENT PROCESSING DELAYS)

OWNER'S NAME: _____

CONSIGNEE NAME AND/OR COMPANY NAME: _____

PHYSICAL ADDRESS: _____

TELEPHONE: _____ (HOME) _____ (WORK) _____ (CELL)

FAX No.: _____ EMAIL: _____

TYPE OF ANIMAL: _____ NUMBER OF ANIMALS: _____ BREED: _____

AGE: _____ years _____ months SEX: MALE FEMALE NEUTERED? YES NO

HOMEAGAIN AVID DESTRON TROVAN OTHER: _____ MICROCHIP No. _____

INITIAL COUNTRY OF EXPORT (including Country of Origin if animal was in transit to The Bahamas): _____

INITIAL PORT OF ENTRY INTO THE BAHAMAS (ISLAND, NAME AND ADDRESS): _____

COUNTRY OF BIRTH OF ANIMAL(S): _____ ANTICIPATED DATE OF ARRIVAL (d/m/y): _____

PURPOSE OF IMPORTING ANIMAL(S): Pet Vacation Service Animal Re-Sale Other (Please state): _____

EXPECTED ISLAND, PORT OF ENTRY NAME AND PHYSICAL ADDRESS IN THE BAHAMAS: _____

EXPECTED ISLANDS VISITING WHILE IN THE BAHAMAS (for vacation and service animals visiting): _____

EXPECTED DURATION OF STAY IN THE BAHAMAS (days) _____

**DOMESTIC ANIMALS MEANS PETS (DOGS, CATS, BIRDS, GUINEA PIGS, HAMSTERS, RABBITS AND FRESHWATER TURTLES).*

NB: IF IN DOUBT, PLEASE CONTACT THE DEPARTMENT OF AGRICULTURE VETERINARY OFFICERS
 FOR CLARIFICATION ON DOMESTIC ANIMAL SPECIES ALLOWED TO BE IMPORTED

PROCESSING FEE: USD/BSD \$10.00 per permit PLUS 12% VAT OF PROCESSING FEE (total of USD/BSD \$11.20 per permits)

PLEASE NOTE: NO PERSONAL CHEQUES OR CASH IN THE MAIL.
 WE ARE NOT RESPONSIBLE FOR CASH LOST IN THE MAIL.
 INTERNATIONAL MONEY ORDER ONLY

SUBMISSION OPTIONS: BY POSTAL MAIL
 BY COURIER (FEDEX, DHL, UPS)
 BY HAND (NEW PROVIDENCE OFFICE, FAMILY ISLAND
 OFFICES OR FAMILY ISLAND ADMINISTRATOR'S OFFICE)

MAILING ADDRESS: DEPARTMENT OF AGRICULTURE,
 DARVILLE'S COMPLEX,
 GLADSTONE AND MUNNINGS ROAD,
 P.O. BOX N-3704
 NASSAU, NEW PROVIDENCE, THE BAHAMAS.

NB: OFFICE HOURS – 9AM-5PM EST FROM MONDAY-FRIDAY (except public holidays)

COMPLETE APPLICATIONS CAN TAKE UP TO 48 BUSINESS HOURS TO PROCESS.

THE FOLLOWING PURE BREEDS AND CROSSES ARE NOT ALLOWED TO ENTER THE BAHAMAS
 DOGS: PITBULLS, AMERICAN BULLY, STAFFORDSHIRE TERRIER, CANE CORSO, PRESA CANARIO and ITALIAN MASTIFF
 CATS: BENGAL, CHAUSIE and SAVANNAH

SUPPORTING DOCUMENTS (IN ENGLISH) TO SUBMIT ALONG WITH THIS APPLICATION FORM:
 (A) HEALTH RECORDS/ SANITARY CERTIFICATES FOR THE ANIMAL(S)
 (B) ANY OTHER SUPPORTING DOCUMENTATION AS AUTHORISED OFFICERS REQUIRE

NB: OFFICIAL INSPECTION MAY BE REQUIRED IN THE BAHAMAS BY GOVERNMENT AUTHORISED VETERINARIANS AND FEES MAY BE APPLIED AS VERIFIED BY AUTHORISED VETERINARIANS

IMPORTER DECLARATION Please note that this application will not be processed without completing this Declaration.

- I/We:
- **Declare** that the information provided in this application is true, correct and accurate to the best of my/our knowledge;
 - **Agree** to pay the processing fee regardless of issue status and all costs associated with the importation of the animals listed on this application; and
 - **Agree** that the responsible Government Agency in The Bahamas reserves the right to deny any application where reasonable grounds have determined the export will be detrimental to the health and welfare of animals, the public, or non-compliant with international or national laws and regulations.

DATE (d/m/y): _____ PRINT NAME: _____ SIGNATURE: _____

OFFICIAL USE ONLY APPROVED DENIED ON HOLD BY: _____ REASON: _____

DATE (d/m/y): _____ SIGNATURE: _____