IMPORTATION PERMIT APPLICATION Commercial Pet Store

Application Fee Structure:

Importation of non-domesticated animals per calendar year (1/1 to 12/31)

One time use: \$20.00
Class 1: 1 to 5 animals \$25.00
Class 2: 6 to 99 animals \$75.00
Class 3: greater than 100 animals \$300.00

NEW MEXICO DEPARTMENT OF GAME & FISH FIELD OPERATIONS DIVISION SPECIAL USE PERMITS PROGRAM ONE WILDLIFE WAY SANTA FE, NM 87507 Email: DGF.Permits@dgf.nm.gov

FOR DEPT. USE ONLY		
Check #		
Amount \$		
Date/		
Initials		
□ Confinement Plan		
□ City/County Letter		
☐ Health Certificate		

Please read entire application first. Submit this application along with appropriate fee to the above address. Application must be submitted at least two (2) weeks prior to proposed importation date. Missing documentation may substantially delay the application process. Importation approval is not guaranteed. A valid permit must be issued before lawful entry into the State of New Mexico.

APPLICANTS NAME	EMAIL	
BUSINESS NAME	WEBSITE	
ADDRESS (mailing)	ADDRESS	
CITY, STATE, ZIP	(physical)	
TELEPHONE (Cell)	(Office)	

Requested date of entry into the State of New Mexico:

SUPPLIER INFORMATION	Health Certificate or License One or more of the following is mandatory prior
SUPPLIERS NAME	to entry (attach copies to app).
BUSINESS NAME	Health Certificate from an accredited veterinarian
ADDRESS	Rearing Facility Inspection health certificate from an accredited veterinarian
CITY, ST, ZIP	USDA Class A, B or C Licenses
PHONE / FAX	USFWS Federal Permits
EMAIL / WEBSITE	Other Licenses held (in-state/out-of-state)
LICENSE TYPE/No.	National Poultry Improvement Plan # (NPIP)

Health Certificates are only valid for 30 days or less, you need to coordinate date of entry with veterinarian appointment.

SPECIES REQUESTED TO BE IMPORTED				QUANTITY Note (S or N) Spayed or Neutered		
*Group	Common Name	Scientific Name (family, genus, species, sub sp.)	Males	Females	Mix/ Unknown	

*Group- refers to restrictiveness on the importation species list

For additional animals, attach or email the list

DESTINATION A	ND PURPOSE FOR IMPORTATION	
CONTAINMENT	AND CONFINEMENT PLAN (Attach photo	ographs illustrations & supporting documents)
CONTAINMENT	AND CONFINENCE IN LAIN (Attach photo	ographs, musuations & supporting documents)
Attach proof from the	he nertinent County and City where anim	nal(s) will reside that possession is allowed.
		imals, contact local Animal Control or Regulatory Division.
	COUNTY	CITY
AGENCY NAME		
CONTACT PERSON		
TITLE		
ADDRESS		
CITY, ST, ZIP		
TELEPHONE		
EMAIL		
	I	
		iled receipt with the valid importation permit
	permit to the individual that purchases the a	
	d that if any animal shows signs of an infect	
		ill be notified immediately, animals may be
destroyed as deemed	necessary by the department or authorized a	igents acting on behalf of the department.