



**ANIMAL HEALTH AND PRODUCTION DIVISION  
MINISTRY OF AGRICULTURE FORESTRY AND FISHERIES  
ST. VINCENT AND THE GRENADINES**

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Richmond Hill,  
Kingstown  
St Vincent and the Grenadines

**PETS IMPORTATION APPLICATION FORM**

**Date:**.....

Please fill in information using CAPITAL LETTERS or typewritten following instructions indicated. Incorrectly filled forms will cause delays in your application process.

**Name of Importer:**.....

**Address:** *(Physical Local Address in St. Vincent and the Grenadines. For Arrivals by Sea – Name and Type of Vessel & a Physical Local Address must be provided)*

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**Telephone number:**.....

**Email address:**.....

**Name of Exporter:**.....

**Address:** *(Physical Address in country of last port of departure where the animal(s) was/were landed before arriving in St. Vincent and the Grenadines)*

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**Address:** *(Permanent Physical Address – if different from above)*

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**Number of animals:**.....

**Specie(s):**.....

**Breed:**.....

**Sex:**.....

**Age:**.....

**Colour:**.....

**Microchip number:**.....

**Countries where animal has been/landed during the past six (6) months (include length of stay in each country)**.....

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**Expected date of arrival in St. Vincent and the Grenadines** .....

**Expected length of stay in St. Vincent and the Grenadines** .....

.....  
Signature