PQA-1 (01/19)

Ministry of Natural Resources & Commerce Division of Quarantine PO Box 1727 Majuro, MH 96960 Republic of the Marshall Islands (692)625-3206/4020

ANIMAL PERMIT APPLICATION

PLEASE TYPE/PRINT CLEARLY

- Animal Permit Application: dog and cat importation application

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Fee: \$ Receipt No	
Approve Permit No Date: _	
Disapprove Others:	
Processed by:	

APPROXIMATE DATE OF ARRIVAL	PET NAME	veeks before arrival. To qualify t	BREED TYPE
		SPECIES: CAT	
METHOD OF IMPORTATION (Via AIR, SURFACE, MAIL, etc.)	SEX (Put Male or Female)	COLOR	AGE
ARKING or DISTINGUISHING CHARACTERISTICS	ORIGIN	DESTINATION: MAJU	
II. Primary Owner Information	: (Mainland or Foreign addre	ss)	
		M.I	

CITY ZIP STATE TELEPHONE: (Home) TELEPHONE: (Work) **CELL PHONE:** EMAIL ADDRESS:

III. Co-Owners or Authorized Handler / Agent (Address while in Marshall Islands)

LAST NAME	FIRST NAME	M,I	
CURRENT ADDRESS:			
CITY	STATE	ZIP	
TELEPHONE: (Home)	TELEPHONE: (Work)	CELL PHONE:	
()	()_	()	
EMAIL ADDRESS:			

SEND THIS APPLICATION TO: Chief of Quarantine or Division of Quarantine

Ministry of Natural Resources & Commerce P.O. Box 1727, Majuro, Marshall Islands 96960 Tel. # (692) 625-3206; Fax # (692) 625-3821; Email address: kikurto@yahoo.com / rmiquarantine@gmail.com

*If material originates in the Marshall Islands, application should be sent to the Chief of Agriculturist in the State or district of destination.