No animals, animal semen, animal embryos, birds, poultry, or hatching eggs may be imported unless a completed application has been received (9 CFR 92, 93, 94, and 98).

FORM APPROVED: OMB NO. 0579-0040

Public reporting burden for this collection of information is estimated to average .17 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection on information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, AG Box 7630, Washington, D.C. 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES

DECLARATION OF IMPORTATION

(Animals, Animal Semen, Animal Embryos, Birds, Poultry, or Hatching Eggs)

INSTRUCTIONS: Importer, owner, or authorized agent shall complete an original and one copy, which shall be presented to Collector of Customs, at port of arrival for appropriate distribution.

1. PORT OF ARRIVAL

2. DATE OF ARRIVAL

3. IMPORT PERMIT NUMBERS

4. COUNTRY OF ORIGIN OF HEALTH CERTIFICATE

5. PORT OF EMBARKATION (City, Country)

6. CARRIER AND VESSEL OR FLIGHT NUMBER

7. NAME AND ADDRESS OF IMPORTER (Include Zip Code)

8. NAME AND ADDRESS OF BROKER (If any) (Include Zip Code and Telephone number)

9. ANIMALS, ANIMAL SEMEN, ANIMAL EMBRYOS, BIRDS, POULTRY, OR HATCHING EGGS

A. NUMBER	B. COMMON NAME (For domestic livestock or poultry, show breed and species)	C. SEX (When it can be determined)	D. PURPOSE OF IMPORTATION (Dairy, feeding, grazing, breeding, racing, pleasure, slaughter, special breeding*, hatching, exhibition, propagation, medical, scientific, educational, etc.)

10. NAME AND ADDRESS OF DESTINATION AFTER RELEASE (Include ZIP Code)

REMARKS

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I hereby request quarantine or inspection service and agree to reimburse Veterinary Services or pay in advance for the cost thereof, as may be required, and waive all claim against Veterinary Services or their employees for damage which may arise from such service.

The undersigned hereby certifies that the foregoing declaration is true and correct.

11. EXECUTED BY (Signature)

12. TYPE OR PRINT NAME AS SIGNED IN ITEM 11

13. TITLE

☐ Authorized Agent ☐ Owner ☐ Importer

14. DATE

* For domestic livestock offered for importation for special breeding under § 1202, item 100.01 of the Tariff Act of 1930 (9 CFR Parts 92 and 151) the entry in this column shall be "Special Breeding VS Form 17-338 attached".

VS FORM 17-29 (JUL 95) Previous edition is obsolete.

PART 1 - COLLECTOR OF CUSTOMS