# HORSE IMPORT APPLICATION

**VIDA Division of Veterinary Services**

<table>
<thead>
<tr>
<th>Shipment to:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Croix</td>
<td>St. John</td>
<td>St. Thomas</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Entry:</th>
<th>Port of Entry:</th>
</tr>
</thead>
</table>

## CONSIGNOR

**Name:**

**Mailing Address:**

**Physical/Business Address:**

**Phone Number:** ______________________________  **Email Address:** ______________________________

## OWNER AND LOCAL ADDRESS

**Name:**

**Mailing Address:**

**Physical Address:**

**Phone Number:** ______________________________  **Email Address:** ______________________________

**Premise Number:** __________  **Owner’s Signature:** ______________________________

## PERTINENT REGULATIONS:

- An official Health Certificate must accompany this permit. Upon arrival, the animal **MUST** be inspected by VIDA staff before it is released. Horses must arrive during regular business hours only.
- Horses must not have been exposed to or involved in any zoonotic disease outbreak within the past six months.
- The horse must be sprayed with a solution of USDA accepted insecticide at specified levels.
- A negative Coggins test results will be accepted if performed within one (1) year before shipment.
- Horses must be vaccinated for Eastern and Western Equine Encephalomyelitis and West Nile disease.

*This Import Permit is not transferable or assignable and expires immediately upon arrival of horse in the United States Virgin Islands. Legal owner of horse is listed above. Change of ownership must be registered in VIDA per 19 V.I.C. Ss 2616*. 

**PLEASE ALLOW 48 HOURS FOR COMPLETION AND ISSUANCE OF PERMIT**

<table>
<thead>
<tr>
<th>NAME OF HORSE</th>
<th>TATTOO/MICROCHIP</th>
<th>BREED</th>
<th>AGE</th>
<th>SEX</th>
<th>COLOR</th>
</tr>
</thead>
</table>

**For Official Use Only**

| Paid: | Receipt #: | Date: | Initials: |

**PLEASE FILL OUT THIS DOCUMENT COMPLETELY, SIGN, AND MAIL TO**

**VI DEPARTMENT OF AGRICULTURE, ATTN: DIRECTOR OF VETERINARY SERVICES, RR 1 BOX 10345, KINGSHILL, VI 00850**

**ALONG WITH A CHECK OR MONEY ORDER FOR $75 PAYABLE TO THE VI DEPARTMENT OF AGRICULTURE**

Revised February 2021.