

Covernment of the United States Virgin Islands Department of Agriculture



ST. CROIX: #1 Estate Lower Love, Kingshill, V.I. 00850 • T: (340) 778-0997 • F: (340) 778-0997 ST. THOMAS: #7944 Estate Dorothea, St. Thomas, V.I. 00802 • T: (340) 774-5182 • F: (340) 774-1823 ST. JOHN: #11 Estate Carolina, Coral Bay, V.I. 00830 • T: (340) 776-6274 • F: (340) 693-5065

Chiamanta	St. Custin		Ct. Th.		C+ I			
Shipment to:	St. Croix		St. Tho	omas 🗀	St. Je	onn 📖		
Date of Entry:				Port of Entry:				
CONSIGNOR								
Name (Legal Owne	r):							
Mailing Address:								
Physical/Business A	ddress:							
Phone Number:			Em	ail Address:				
CONSIGNEE AND LO	OCAL ADDRESS							
Name:								
Mailing Address:								
Physical Address: _								
GPS coordinates of	Physical Addres	ss:						
Phone Number:			Em	Email Address:				
This Import Permit is Change of ownership	must be register	red in VIDA per	19 V.I.C. Ss 261				tes Virgin Islands.	
NAME OF HORSE		TATTOO/M	ICROCHIP	BREED	AGE	SEX	COLOR	
			F O(()	0 . 1				
			For Official U	se Univ				



Commissioner of Agriculture

Covernment of the United States Virgin Islands Department of Agriculture



ST. CROIX: #1 Estate Lower Love, Kingshill, V.I. 00850 • T: (340) 778-0997 • F: (340) 778-0997 ST. THOMAS: #7944 Estate Dorothea, St. Thomas, V.I. 00802 • T: (340) 774-5182 • F: (340) 774-1823 ST. JOHN: #11 Estate Carolina, Coral Bay, V.I. 00830 • T: (340) 776-6274 • F: (340) 693-5065

HORSE INTERSTATE/INTERTERRITORY IMPORT APPLICATION (cont) Page 2/2

Horse Name: Owner:	
 PERTINENT REGULATIONS: An official Health Certificate (APHIS 7001 form or VS FORM 1740 accompany this permit, written within 30 days of arrival in USVI. The horse must be sprayed with a solution of USDA accepted ins product and date of administration indicated on the health certineeds to be updated prior to departure if the date of administration omission of this procedure on the health certificate can be caused. 	secticide at specified levels within 7 days of departure, and ficate. The health certificate accompanying the animal tion is after the date of processing this import permit. An erfor quarantine upon arrival.
 The horse must be treated with a full dose of Quest® or a similar date of administration indicated on the health certificate. A negative Coggins test performed within one (1) year before sh date of sampling, laboratory, and accession number included. Horses must be currently vaccinated for Eastern and Western Equation the health certificate. This statement must be written on the health certificate: The arcommunicable disease and are not known to have been exposed Upon arrival, the animal MUST be inspected by VIDA staff before hours only. Horses must arrive in a trailer or other container that is safe for pose a risk of causing injury to the animal under normal condition. 	ipment must be indicated on the health certificate, with quine Encephalomyelitis and West Nile disease, indicated on nimals examined and listed on this CVI show no evidence of to any communicable disease in the last 30 days. The it is released. Horses must arrive during regular business transport, contains the animal effectively, and does not
Failure to complete all requirements, or the arrival of a horse deemed by arriving in a container or trailer deemed by VIDA staff as unsafe for transpand possibly any other horses included in the same shipment. In the every purposes, and depending on the issue or disease at hand, VIDA may opt for 19, § 2706 (2019) and V.I. Code tit. 19, § 2718 (2019). All fees associated will be at the consignee's expense.	VIDA staff as unhealthy or unfit for travel, or an animal port, may result in impounding or quarantining of the horse nt of an impound or quarantine for disease or health for euthanasia at their discretion pursuant to V.I. Code tit.
Consignee Signature (acknowledging the above stipulations)	Date
APPROVAL	

Date