South Dakota Animal Industry Board

411 S Fort St., Pierre, SD 57501
(605)773-3321 http://aib.sd.gov

PERMIT APPLICATION FOR IMPORTATION OF POULTRY AND HATCHING EGGS INTO SOUTH DAKOTA

PERMIT VALID FROM SEPTEMBER 1, 2015 THRU AUGUST 31, 2016

SECTION I. APPLICANT INFORMATION

Company Name: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Email Address: _____

Phone: _____ NPIP #: _____

We hereby apply to the South Dakota Animal Industry Board for permission to ship the following into the state of South Dakota: (Check all that apply)

_____ POULTS UNDER 4 MONTHS
_____ CHICKS UNDER 5 MONTHS
_____ PHEASANTS
_____ OTHER POULTRY (please list types):
_____

_____TURKEY HATCHING EGGS
_____CHICKEN HATCHING EGGS
_____PHEASANT HATCHING EGGS
_____OTHER POULTRY HATCHING EGGS (please list types):
_____

I am familiar and agree to comply with the rules and regulations governing the importation of poultry and hatching eggs into the state of South Dakota. By signing, I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Print Name:_____ Signature:_____ Date: _____

*******SUBMIT TO OFFICIAL STATE AGENCY ADMINISTERING THE NPIP TO COMPLETE SECTION II*******

SECTION II. TO BE COMPLETED BY NPIP STATE OFFICIAL

	Yes	No
Is the above applicant participating in the National Poultry Improvement Plan?	___	____

Please verify the disease status of the above checked poultry and/or hatching eggs for shipment into South Dakota.

_____U.S. Pullorum-Typhoid Clean/State
_____U.S. Mycoplasma Gallisepticum (MG) Clean
_____U.S. Mycoplasma Synoviae (MS) Clean
_____U.S. Mycoplasma Meleagridis (MM) Clean
_____U.S. Salmonella Enteritidis (SE) Clean
_____U.S. Salmonella Monitored

_____U.S. Sanitation Monitored
_____U.S. Avian Influenza (AI) Clean
_____U.S. H5/H7 AI Monitored
_____U.S. H5/H7 AI Clean
_____U.S. MG Monitored
_____U.S. MS Monitored

State Official's Signature: _____ Date: _____

PLEASE SUBMIT COMPLETED FORM TO THE SOUTH DAKOTA ANIMAL INDUSTRY BOARD.

AIB form PTC104 (revised 07-15)