

FOREST DEPARTMENT

MINISTRY OF SUSTAINABLE DEVELOPMENT, CLIMATE CHANGE AND DISASTER RISK MANAGEMENT

FOREST DRIVE

TEL: 822-1524 | secretary@forest.gov.bz BELMOPAN CITY FAX: 822-1523 www.forestdepartment.gov.bz



Form-FD-WL-IE

IMPORT/EXPORT PERMIT
APPLICATION FORM

For Official Use Only						
Date received:						
Approved:						
Rejected:						
Date of Issue:						
Reference no.						

Type of Permit applyi	ing for:		Import	Export				
Exporter/Importer Information:								
Exporter Details				Importer Details				
Name of Exporting Company:			Name of Impor	Name of Importing Company:				
Company Registry #:				Company Registry #:				
Name of Contact Person:			Name of Conta	Name of Contact Person:				
Social Security or Passport number for Contact Person:			Social Security	Social Security or Passport number for Contact Person:				
Company/Contact Person Address:			Company/Con	Company/Contact Person Address:				
Company/Contact Person Phone Number:			Company/Con	Company/Contact Person Phone Number:				
Contact Person Email A	Address:			Contact Person	Contact Person Email Address:			
Description:								
Species	Country of CITES Origin status App. I, II, III or none		Number	Class (Research, Pet, Other)		Identification (Band #, Tag #, hatch date)		
TD.		NT	•	3.5 3 6 4				
Type		Number		Mode of storage		Tests to be conducted		
Live Specimen Plant Sample								
Blood Sample								
Tissue sample								
Feather sample								
Swab Sample (Buccal	/Skin)							
Other:	(SKIII)							
Research Permit Reference No Port of Entry/Exit in Belize:								
Mode of Exportation/Importation: Treatment type:								
Expected date of Expo	-				, cj p			
Submitting this application application form is confident documents may be reque information provided is f	on form dential a	does no and will ing the	t guarantee o only be used vetting proce	for the purpose of vers. If at any point di	etting uring	g the application the vetting proc	n. Other details and/or ess it is found that	
Signature of applicant								