

Directorate Animal Health: (Permit Office)

Private Bag X138, Pretoria, (Tshwane) 0001

Delpen Building, c/o Annie Botha & Union Street, Riviera, 0084

Enquiries: Ms Ina Labuschagne, Tel: +27 12 319 7514/7632/7633/7503/7406/7414

Fax: +27 12 329 8292

APPLICATION TO IMPORT ANIMAL PRODUCTS INTO THE RSA (NOT SUBJECTED TO QUARANTINE) FOR OWN USE

IMPORTANT NOTICE

- 1. Please complete this form fully, in **PRINT**, prior to the return thereof.
- 2. Import permits are valid for a limited period and one consignment only.
- 3. Imports may only be authorised in writing by issuing a veterinary import permit.
- 4. Application for a permit must be made at least four weeks but not longer than eight weeks prior to introduction.
- 5. Applicants are advised to phone the permit office if the permit has not been received two weeks after the application was submitted.
- 6. It is the responsibility of the importer to read and comply with the conditions on the veterinary import permit
- 7. After completion, return to: Director of Animal Health, Private Bag X138, Pretoria, 0001 or FAX: +27 12 329-8292 / +27 319 7644
- 8. Original veterinary certificates must be made available at the port of entry and need not accompany this application, unless it is specifically requested.
- 9. In the case of CITES species, certified copies of the CITES permit(s) must accompany the application.

A. IF APPLICATION IS MADE BY AN AGENT (1) ON BEHALF OF AN IMPORTER (2), PLEASE PROVIDE:

1. Full names of importer ²				
2. Registration number (if applicable)				
3. Address of importer				
4. Attach proof in the form of a signed letter (on the importer's letterhead where				
applicable) stating:				
a). That you are authorised to apply on behalf of that importer AND				
b). That the importer agrees to be bound to all the terms and conditions of this application as well as				
any permission, permit or authorisation issued as a result thereof.				
NO APPLICATION WILL BE CONSIDERED WITHOUT SUCH CONFIRMATION BEING ATTACHED				

R IMPORTER'S DETAILS:

	WEU.			
1. Full name of importer				
2. Address of importer				
3. Telephone number		6. Fax	number	
5. E-mail				
7. Customs Code				
8. The controlled hunting	a). Area			
area where you				
intend to hunt:	b). Country			
·	I products you inten-	d to import	should be indicated below for	
each heading:				
	A. Cloven-hoofed	game pro	ducts	
a). Biltong				
b). Raw meat				
Please specify whether venison or game meat/beef/				
mutton/poultry				
c). Cooked & Fermented meat (specify)				
d). Masks				
e). Skins				
f). Horns				
g). Skulls				
h). Heads of wild animals with or without horns				
B. Products of other game and/or vermin				
a). Zebra skins				
b). Carnivorous-animal skins				
c). Reptile skins				
d). Elephant tusks				
e). Elephant feet				
f). Elephant tails				
g). Elephant ears				
h). Elephant skin strips				
i). Elephant penis skins				
j). Hippo teeth				
k). Hippo feet				
I). Hippo skin strips				
m). Rhino horns				

¹ "<u>agent</u>" means any person/ entity acting on behalf of the importer.

² "<u>importer</u>" (for purpose of this application) means any natural person or legal entity other than the person filling in the form who intends to bring live animals or animal products into South Africa from abroad.

n). Rhino feet	
11. Other products not mentioned above	
12 The port of entry in the Republic through which the product will be imported:	
13. Full address of immediate destination in the Republic:	
14. Provincial state veterinary office closest to the final destination in point 10 above: (Town/City) (Name of state veterinarian or his/her	
representative) 15. Date of embarkation of the products for	
the Republic:	

By attesting my signature hereto, I -

- a. acknowledge that I have read and understand the provisions of the Animal Diseases Act,1984 (Act 35 of 1984) and the Meat Safety Act (Act 40 of 2000) where applicable and any regulations promulgated thereunder, as far as it relates to this application and anything contemplated herein*;
- b. declare that what I have stated or provided in this application is correct at the time the application is made;
- c. understand that any false or misleading information provided may lead to my prosecution and/or other legal action taken against me;
- d. realise that if in the opinion of the Department I am wilfully providing false or misleading information this may be taken into consideration when considering future applications;
- e. confirm that I take responsibility for the safety of the meat and other animal products that will be consumed by human & animals;
- f. have read and I understand the attached information leaflet;
- g. confirm that the product will not be sold or disposed of in any way other than by own consumption / use.
- h. The permit is not transferable and cannot be used by any other importer except the importer specified on the permit.

Full Names as per ID document	ID number
Signature of applicant Date DO YOU WANT THE PERMITS TO BE: COLLECTED - Personal	
COLLECTED - Courier (Importer to make arrangements)	
POSTED	

<u>http://www.daff.gov.za/</u> → Divisions → Food and Veterinary Services → Import/Export→ Legislation → Animal Diseases Act (with all amendments) → The Animal Diseases Act (Act 35 of 1984) (6MB)

Please refer to the information document on the importing animals and animal products into the RSA for details on the permit fee. The changes in tariffs are published annually in the Government Gazette.

Banking details:

NAME OF BANK: STANDARD BANK OF SOUTH AFRICA

ACCOUNT HOLDER NATIONAL DEPARTMENT OF AGRICULTURE

ACCOUNT NUMBER 011219556

BRANCH CODE 010845

BRANCH NAME ARCADIA

IB BRAND 0001982 CENTRE CODE

Swift Code SBZA-ZAJJ

NB: No refunds will be given, if permits are not collected

^{*} For a copy of the Animal Diseases Act, 1984 (Act 35 of 1984) visit: