## REPUBLIC OF MAURITIUS

## MINISTRY OF AGRO-INDUSTRY & FOOD SECURITY DIVISION OF VETERINARY SERVICES - REDUIT

TEL NO: 466 6662 FAX: (230) 464 2210 EMAIL: moa-dvs@mail.govmu.org

Date: .....

APPLICATION FORM FOR IMPORT PERMITS (Frozen, Chilled & Canned Meat & Other Products)		
Name of Importer		
Address		
Phone No./Fax No.		
Email Address		
Type of product (Chilled/Frozen/Car	ned)	
Specific details of product		
Quantity (kg/tons) of each product mentioned above		
Country of origin		
Address of Cold Storage/Store		
Storage capacity		
No. of Permits		
Date of order		
Expected date of arrival		
		Signature of applicant
*****	******	****
For Of	ficial Us	<u>se</u>
Certificate of Entry No.		
Date of Landing		
Quantity landed		
Date of release		
	<u>I</u>	

Signature of Veterinary Officer