MONTANA DEPARTMENT OF LIVESTOCK ANIMAL HEALTH DIVISION www.liv.mt.gov



OFFICE USE ONLY				
CHECK/MO: _				
AMOUNT PAID:_				
TRANSMITTAL #:_				
# OF PERMITS:_				
ISSUE DATE: _				
EXPIRATION DATE:				

MONTANA BIOLOGICS IMPORT PERMIT APPLICATION

Company Name (Please include any merged company names)	Company Contact				
Mailing Address	Phone	Fax			
City, State, Zip	En	mail			
How would you like to receive your permit(s): ☐ Email	□ Mail				
Payment Method: Check or Money Order					
 Online Payment (Credit Card or E- 	Check)* Payment Confirma	ntion			
*Online payments can be made	at https://svc.mt.gov/doa/op	p/LIVAnimalHealth/cart			
and to expedite processing the application should be sent to livpermits@mt.gov					

APPLICATION TO IMPORT A BIOLOGIC IN ACCORDANCE WITH ADMINISTRATIVE RULE OF MONTANA (ARM) 32.3.2301 AND 32.2.404. THE FEE FOR A PERMIT IS \$10.00 PER EACH PRODUCT RENEWAL OR \$30.00 FOR ANY NEW LICENSED PRODUCT. \$5.00 OF THE PERMIT FEE IS NON-REFUNDABLE. PERMITS FOR PERMANENTLY LICENSED PRODUCTS EXPIRE FIVE (5) YEARS FROM THE YEAR IN WHICH THEY ARE ISSUED. CONDITIONALLY LICENSED PRODUCTS EXPIRE FIVE (5) YEARS FROM THE YEAR IN WHICH THEY ARE ISSUED OR UPON LICENSE TERMINATION IF NOT RENEWED. PERMITS ARE NOT TRANSFERRABLE.

PRODUCT CODE	SPECIES	LICENSE ISSUE DATE	LICENSE EXPIRATION DATE	PRODUCT NAME	PRODUCT DESCRIPTION	RENEWAL OR NEW PERMIT REQUEST
1.						
2.						
3.						

MONTANA IMPORT PERMIT APPLICATION: BIOLOGICS

CONTINUATION — COPY AS NEEDED

PRODUCT CODE	SPECIES	LICENSE ISSUE DATE	LICENSE EXPIRATION DATE	PRODUCT NAME	PRODUCT DESCRIPTION	RENEWAL OR NEW PERMIT REQUEST
4.						
5.						
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