



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

## 2023 MONTANA BIOLOGICS IMPORT PERMIT APPLICATION

Company Name (Please include any merged company names)		Company Contact	
Mailing Address		Phone	Fax
City, State, Zip		Email	

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 Confirmation \_\_\_\_\_  
 \*Online payments can be made at <https://svc.mt.gov/doa/opp/LIVAnimalHealth/cart>  
 and to expedite processing the application should be sent to [livpermits@mt.gov](mailto: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.						

**2023 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.						
6.						
7.						
8.						
9.						
10.						
11.						
12						