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



OFFICE U	ISE 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)	Compa	Company Contact			
Mailing Address	Phone	Fax			
City, State, Zip	E	Email			
How would you like to receive your permit(s): □ Ema Payment Method: □ Check or Money Order					
•	•				
*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					
City, State, Zip How would you like to receive your permit(s): □ Ema Payment Method: □ Check or Money Order □ Online Payment (Credit Card or *Online payments can be ma	il □ Mail r E-Check)* Payment Confirm ade at https://svc.mt.gov/doa/o	Email nation pp/LIVAnimalHealth/cart			

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.						
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