

MONTANA DEPARTMENT OF LIVESTOCK ANIMAL  
HEALTH DIVISION



**OFFICE USE ONLY**

CHECK/MO: \_\_\_\_\_  
 AMOUNT PAID: \_\_\_\_\_  
 TRANSMITTAL #: \_\_\_\_\_  
 # OF PERMITS: \_\_\_\_\_  
 ISSUE DATE: \_\_\_\_\_  
 EXPIRATION DATE: \_\_\_\_\_

**MONTANA BIOLOGICS  
IMPORT PERMIT APPLICATION**

**ALL BIOLOGIC APPLICATIONS MUST BE SUBMITTED WITH A COPY OF THE VALID USDA LICENSE FOR THE PRODUCT(S) AND PRODUCT LABELS**

Company Name (Please include any merged company names)

Company Contact

Mailing Address

Phone

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.

**BIOLOGIC APPLICATIONS AND FEE ARE REQUIRED ON ALL NEW BIOLOGICS. RENEWAL APPLICATION AND FEES RE REQUIRED ON THE FOLLOWING PRODUCTS- FULL USDA LICENSED RABIES VACCINES, BRUCELLOSIS VACCINES, ANTHRAX VACCINES, TUBERCULOSIS VACCINES, INFECTIOUS LARYNGOTRACHEITIS VACCINES, EXPERIMENTAL PRODUCTS, AND ALL CONDITIONAL LICENSED PRODUCTS.**

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

MT Dept. of Livestock | Animal Health Division  
 PO Box 202001, 301 N Roberts | Ph 406-444-2976  
 Helena MT 59620-2001 | Fax 406-444-1929

**MONTANA IMPORT PERMIT  
APPLICATION: BIOLOGICS**

**CONTINUATION – COPY AS NEEDED**

<b>PRODUCT CODE</b>	<b>SPECIES</b>	<b>LICENSE ISSUE DATE</b>	<b>LICENSE EXPIRATION DATE</b>	<b>PRODUCT NAME</b>	<b>PRODUCT DESCRIPTION</b>	<b>RENEWAL OR NEW PERMIT REQUEST</b>
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						