REQUEST FOR INSPECTION OF WILDLIFE FOR EXPORT

	DATE OF INSPECTION	DATE OF SHIPMENT	PERMIT NUMBER(S)	CATEGORY OF WILDLIFE
NAME	OF EXPORTER:			
ADDR	RESS OF HOLDING ST	ATION:		
-CONT	FACT No.:			,
DATE		_		Annual distribution and the second se
SIGNATURE:			RECEIVED BY:	
ADDITIONAL CERTIFICATION REQUIRED				YES
IF YE	S, PLEASE ATTACH:			
LAB TESTS REQUIRED:				YES
IF YES, PLEASE LIST TESTS:				NO