



Wisconsin Department of Agriculture,  
Trade and Consumer Protection  
Division of Animal Health  
PO Box 8911, Madison, WI 53708-8911  
Phone: (608) 224-4872 Fax (608) 224-4871

## OFFICE USE ONLY

IMPORT PERMIT NUMBER:

DATE ISSUED:

DATE EXPIRES: Thirty days after issued

SIGNATURE:

# CIRCUS, RODEO, & MENAGERIE IMPORT PERMIT APPLICATION

ss. ATCP 10.07 and 10.81 Wis. Admin. Code

**Completing this form is mandatory for importing animals under ss. ATCP 10.81. Importing under these circumstances without this permit is subject to civil forfeitures and/or imprisonment.**

## INSTRUCTIONS:

1. Complete sections A – F. Items with asterisk “\*” are required fields.
2. Submit completed application form **AND** certificate of veterinary inspection (CVI), also known as a health certificate. Both documents are required for the permit application.
3. Email to [DATCPAnimalImports@wisconsin.gov](mailto:DATCPAnimalImports@wisconsin.gov), fax to (608) 224-4871, or mail to the address above.
4. Processing hours are Monday-Friday 8AM-4PM Central Time. Call (608) 224-4874 with questions.

### Section A – Owner Information

*CONSIGNOR LEGAL NAME (CIRCUS/RODEO/MENAGERIE ANIMAL OWNER/MANAGER)		*DBA/TRADE NAMES/OTHER NAMES USED	
*LEGAL ENTITY TYPE <i>If animals are owned by business, legal entity section must be completed</i> (Check one): <input type="checkbox"/> General Partnership <input type="checkbox"/> Cooperative <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> LLC <input type="checkbox"/> Other:			
*CONSIGNOR LEGAL ADDRESS STREET		*CITY	*STATE *ZIP
*CONSIGNOR PHONE (   ) -		CONSIGNOR LIVESTOCK PREMISES CODE	

### Section B – Event Information

*EVENT DATE	*EVENT NAME	*EVENT LIVESTOCK PREMISES CODE †	
*EVENT ADDRESS STREET	*CITY	*STATE	*ZIP
<b><i>If touring the state of Wisconsin (more than one event), please attach a list including date, name of event, and location (address / city / state) for each stop. You must also list premise codes for all locations if you have livestock.</i></b>			

### Section C – Shipment Information

*SHIPMENT DATE	*NUMBER OF ANIMALS IN SHIPMENT
*SPECIES OR ANIMAL TYPE(S)	

### Section D – Certificate of Veterinary Inspection (CVI) or Health Certificate

*CVI or HC NUMBER	*CVI INSPECTION DATE
*ISSUING VETERINARIAN	*CLINIC OR VETERINARIAN EMAIL

### Section E – Veterinarian and Clinic Information (ONLY required if not on Certificate of Veterinary Inspection)

VETERINARY CLINIC NAME	BUSINESS PHONE (   ) -	BUSINESS FAX (if using fax) (   ) -
CLINIC ADDRESS STREET	CLINIC CITY	STATE   ZIP

### Section F – Signature & Date

*APPLICANT PRINTED NAME (VETERINARIAN OR IMPORTER)	
*APPLICANT SIGNATURE (VETERINARIAN OR IMPORTER)	*APPLICATION DATE

† The Livestock Premises Code is required if the animals are classified as livestock and will be at a venue where livestock are kept (farms, fairgrounds, exhibition facilities, etc.).  
Personal Information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.)

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