

**APPLICATION FOR CITES PERMIT/CERTIFICATE**

Expedition fee required (Head Office applications only!!), please tick box. Additional fee payable.

PLEASE WRITE CLEARLY AND CAPITAL LETTERS

## (A) YOUR CONTACT DETAILS:

NAME (of company or private)			
POSITION (i.e. owner/ secretary)			
ID / PASSPORT NUMBER			
PHYSICAL ADDRESS		POSTAL ADDRESS	
PHONE (W & H)		CELL	
FAX		WEBSITE & EMAIL	
PLEASE SPECIFY IF YOU WANT THE PERMIT POSTED OR IF YOU WANT TO COLLECT IT:			

## (B) IMPORT/EXPORT PHYSICAL DETAILS:

TO (IMPORTER), INCLUDE <b>PHYSICAL</b> (NOT POSTAL) ADDRESS		FROM (EXPORTER), <b>INCLUDE PHYSICAL</b> (NOT POSTAL) ADDRESS	
COUNTRY:		COUNTRY:	
ID / PASSPORT NUMBER		ID / PASSPORT NUMBER	

(C) **INTENDED** USE OF SPECIMEN BY END HOLDER / USER (i.e. END PURPOSE OF THE TRANSACTION). PLEASE MARK RELEVANT BLOCK WITH AN "X"

PERSONAL	TRADE (i.e. to be (re)sold or used for ANY other commercial purpose after export/import)	HUNTING TROPHY	OTHER (i.e. medical, scientific, zoo) – PLEASE SPECIFY "OTHER"
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## (D) ADDITIONAL INFO

ANY ADDITIONAL INFORMATION RELEVANT TO PERMIT APPLICATION, I.E. QUOTA NUMBERS, PERMIT TO BE CANCELLED/REPLACED/RE-ISSUED, ETC:

PLEASE INCLUDE PROOF OF ORIGIN OF THE SPECIMENS (I.E. RECEIPT/INVOICE, PREVIOUS IMPORT PERMIT, SWORN STATEMENT ETC.) – SEE PARAGRAPHS F & G



(E) DETAILS OF SPECIES

<u>SCIENTIFIC NAME (GENUS &amp; SPECIES)</u>	<u>COMMON NAME OF ANIMAL(S) / PLANT(S)</u>	<u>DESCRIPTION OF SPECIMENS *</u>	<u>QUANTITY (INCL. UNIT)</u>	<u>CITES APPENDIX AND SOURCE CODE#</u>

\*I.E. LIVE ANIMAL (INCL. IDENTIFYING MARKS, MICROCHIP OR TRANSPONDER NO. AND AGE/SEX), SKIN (INCL. TAG NO.), SKULL, HORNS, POWDER, JUICE, POLLEN, LEAVES, SEEDLINGS, SEED, EXTRACT ETC.

# CITES I, II OR III LISTED AND SOURCE CODE (E.G. CAPTIVE BRED = C / WILD = W / ARTIFICIALLY PROPOGATED = A)



(F) IN CASE OF AN IMPORT PERMIT APPLICATION, PLEASE INCLUDE COPY OF THE EXPORT PERMIT.

(G) IN CASE OF A RE-EXPORT CERTIFICATE APPLICATION, (i.e. IF ARTICLE HAS EVER BEEN PREVIOUSLY EXPORTED / IMPORTED INTERNATIONALLY) PLEASE ATTACH A COPY OF ALL OF THE PREVIOUS EXPORT AND IMPORT PERMITS. (PLEASE CHECK THAT ALL THE DETAILS ARE CORRECT AND THAT YOU STILL HAVE SPECIMENS LEFT FOR THAT SPECIFIC PERMIT TO RE-EXPORT).

(H) THIS APPLICATION MUST BE ACCOMPANIED BY PROOF OF PAYMENT. APPLICATIONS NOT ACCOMPANIED BY PROOF OF PAYMENT CANNOT BE PROCESSED.

YOUR SIGNATURE : \_\_\_\_\_

DATE : \_\_\_\_\_

**CONTACT DETAILS**

**PHYSICAL** PGWC Shared Services Center, cnr Bosduif & Volstruis Streets,  
Bridgetown, 7764

**POSTAL** Private Bag x29, Gatesville, 7766

**TELEPHONE** 021-483 0000

**FAX** 086 556 7734.

**E-MAIL** [permits.fax@capenature.co.za](mailto:permits.fax@capenature.co.za).

WE WILL CONTACT YOU AS SOON AS YOUR PERMIT / CERTIFICATE IS READY FOR COLLECTION VIA PHONE OR FAX TO YOU A COPY THEREOF. PLEASE NOTE THAT YOU MUST HAVE THE ORIGINAL PERMIT / CERTIFICATE AS A COPY THEREOF IS NOT A VALID DOCUMENT AND CANNOT BE USED FOR IMPORT / EXPORT. PLEASE ALSO CHECK THAT ALL OF THE DETAILS REFLECTED ON YOUR PERMIT / CERTIFICATE ARE CORRECT BEFORE EXPORT / IMPORT.

PLEASE CONTACT THIS OFFICE IF ANYTHING IS UNCLEAR