



**APPLICATION FOR A PERMIT TO  
IMPORT / TRANSPORT WILD ANIMALS**

Nature Conservation Ordinance, 1974 (Ordinance 19 of 1974) (section 44(1)(a) and (e))

Name of **applicant** :

|  |                          |
|--|--------------------------|
|  | ID Number of applicant : |
|--|--------------------------|

Postal **and** residential address of **applicant** :

|               |               |
|---------------|---------------|
|               |               |
|               |               |
| Postal code : | Postal code : |
| Ph No. :      | Cell :        |
| Fax No. :     | Email :       |

| Common name | Scientific name | Number |
|-------------|-----------------|--------|
|             |                 |        |
|             |                 |        |
|             |                 |        |
|             |                 |        |

Transport **FROM** (ORIGIN)

Transport **TO** (RECIPIENT)

|                                                              |                                                              |
|--------------------------------------------------------------|--------------------------------------------------------------|
| Name :                                                       | Name :                                                       |
| ID No. :                                                     | ID No. :                                                     |
| Farm/Property:                                               | Farm/Property :                                              |
| District :                                                   | District :                                                   |
| Province :                                                   | Province :                                                   |
| Country :                                                    | Country :                                                    |
| Supply COAE/captivity permit Number and Expiry date thereof: | Supply COAE/captivity permit Number and Expiry date thereof: |
| Reason for the import / transport / translocation :          |                                                              |

Name, postal **AND** residential address of **RECIPIENT**:

|       |         |
|-------|---------|
|       |         |
|       |         |
|       |         |
| Ph :  | Cell :  |
| Fax : | Email : |

Period of validity desired

|       |     |
|-------|-----|
| From: | to: |
|-------|-----|

- ➔ When applying for **IMPORT** always include copy of the **EXPORT** permit, **or** letter from the Nature Conservation authority from the province/country of export confirming that they have no objection to the export.

Signature of applicant

Date

Fax to : 021 – 659 3415 with proof of payment

Website: <http://www.capenature.co.za/>