



**APPLICATION FOR A TEMPORARY MOVEMENT CERTIFICATE TO
Temporarily Import, Export, or Re-export
Live Animals, Live Plants or Animal Parts, Plant Parts or Products**

CITES Form A4 (2006/01/24)

**CONVENTION ON INTERNATIONAL TRADE IN ENDANGERED SPECIES OF
WILD FAUNA AND FLORA (CITES)**

If you need assistance in completing this form, the CITES Management Authority Office can be contacted through its Web site at www.cites.ec.gc.ca and by telephone at (819) 997-1840 /Toll Free 1-800-668-6767.

Important Notes

- Application can be sent by **ONE** of the following methods (Send application only once) :

 To: Management Authority, Convention on International Trade in Endangered Species (CITES)
 By mail: Canadian Wildlife Service, Environment Canada, Ottawa (Ontario) K1A 0H3
 By courier: Place Vincent Massey, Suite 302, 351 St-Joseph Boulevard, Gatineau (Québec) J8Y 3Z5
 By fax: (819) 953-6283 (applications **exceeding** 10 pages will **not** be accepted by fax).
- All details of the application will be treated as **CONFIDENTIAL**.
- All applicable sections must be filled out. Incomplete application forms will not be accepted. Additional information or documents may be requested from the applicant in order to process the application.
- The applicant must sign the application form.
- There is a six (6) to eight (8) week processing period for all application forms.
- If the application is approved, the certificate and certified copies will be sent by mail to the applicant.
- If you would like your Certificate sent by courier, provide a pre-paid envelope and your business account number or VISA or Mastercard number to pay courier charges. Certificate will be sent to the address in Section 3A, unless otherwise specified by the applicant.
- Import and export of plants and animals and their parts and derivatives is also controlled by the **Health of Animals Act** and the **Plant Protection Act** implemented by the **Canadian Food Inspection Agency (CFIA)**. CFIA can be contacted toll free at : 1 877 493-0468 (Canada East); 1 800 835-4486 (Canada Central); 1 888 732-6222 (Canada West).

SECTION 1 APPLICATION TYPE

Check ONE of the following:

New Application

Renewal of a Temporary Movement Certificate (Canadian)

Number of the CITES Certificate: _____ Expiry Date: _____

Replacement of a Temporary Movement Certificate (Canadian)

Number of the CITES Certificate: _____ Expiry Date: _____

Reason for replacement: _____

Expected date of Certificate reception (approximate if necessary): _____/_____/_____
Year Month Day

I would like my Certificate sent by: **mail** **courier** (cost incurred by applicant)

If you would like your Certificate sent by courier, please provide:

Pre-paid envelope; or

Business account number: _____; or

Credit card number: _____ Card Type: _____ Exp. date: _____

SECTION 2 TRADE TYPE

Check ONE of the following (separate applications must be made for each type of trade):

Import / Re-export

No.	Date of Entry to Canada	Canadian Port of Entry	Date of Exit from Canada	Canadian Port of Exit	Destination Country
1					
2					
3					
4					

Export / Re-import

No.	Date of Exit from Canada	Canadian Port of Exit	Destination Country	Date of Entry to Canada	Canadian Port of Entry
1					
2					
3					
4					

SECTION 3 NAME AND ADDRESS

A - APPLICANT (Canadian importer or exporter)

Name of person:			
Name of business or organization (if applicable):			
Type of business or organization: <input type="checkbox"/> museum <input type="checkbox"/> zoo <input type="checkbox"/> circus <input type="checkbox"/> other If other, specify:			
Street and number:			Post Office Box:
City:	Province/Territory:		Postal Code:
Country:	Website:	Email:	
Home Phone:	Work Phone:	Cell Phone:	Fax:

B - BROKER (e.g., shipping company)

Name of person:			
Name of business or organization (if applicable):			
Street and number:			Post Office Box:
City:	Province/Territory:		Postal Code:
Country:	Website:	Email:	
Home Phone:	Work Phone:	Cell Phone:	Fax:

ATTENTION IMPORTERS/EXPORTER WITH A SINGLE SHIPMENT:

C – CONSIGNEE/SUPPLIER (Foreign country importer or exporter)

Name of person:			
Name of business or organization (if applicable):			
Street and number:			Post Office Box:
City:	Province/Territory:		Postal Code:
Country:	Website:	Email:	
Home Phone:	Work Phone:	Cell Phone:	Fax:

ATTENTION IMPORTERS/EXPORTERS WITH MULTIPLE SHIPMENTS AND/OR MULTIPLE DESTINATIONS: Please complete Section 3 – C for each destination. Use additional sheets if necessary.

SECTION 4 PURPOSE

Note that all the live animals/plants and animal/plant parts or products identified in this application must be exported/imported for Travelling Exhibition purposes only. Specimens traded for a purpose other than Travelling Exhibition must be applied for using a different application.

Check the box that best describes your situation:

<input type="checkbox"/> Circuses		Q
<input type="checkbox"/> Other live animal exhibitions	Specify type:	Q
<input type="checkbox"/> Live plant exhibitions		Q
<input type="checkbox"/> Other travelling exhibitions	Specify type:	Q

SECTION 5 DESCRIPTION OF SPECIMENS

- **Names:** avoid use of trade names or general terms that do not adequately describe the species. Identification at the higher taxon level (e.g., PRIMATES spp., Felidae spp.) is not acceptable.
- **Description:** for animal part or product, you must specify what part (e.g. feather, egg, skin) or what product (e.g. piano, handbag, belt)
- **Quantity:** do not use general terms such as “box” or “case”. If a re-export, use the same unit of measurement as indicated on previously issued permits.
- **Use additional sheets if necessary.**

Item No.	Scientific Name (genus, species, sub-species)	Common Name and House Name (if applicable- for live animals)	Description	Quantity (specify units, e.g., kg, cm, etc.)	Distinctive Markings (serial, registration, band, tattoos, microchip numbers, etc.)
1			<input type="checkbox"/> Live specimen: <input type="checkbox"/> male <input type="checkbox"/> female		
			<input type="checkbox"/> Animal/Plant Part, specify:		
			<input type="checkbox"/> Product, specify: Number of specimens used: Date manufactured: Name of manufacturer:		
2			<input type="checkbox"/> Live specimen: <input type="checkbox"/> male <input type="checkbox"/> female		
			<input type="checkbox"/> Animal/Plant Part, specify:		
			<input type="checkbox"/> Product, specify: Number of specimens used: Date manufactured: Name of manufacturer:		
3			<input type="checkbox"/> Live specimen: <input type="checkbox"/> male <input type="checkbox"/> female		
			<input type="checkbox"/> Animal/Plant Part, specify:		
			<input type="checkbox"/> Product, specify: Number of specimens used: Date manufactured: Name of manufacturer:		

SECTION 6 ORIGIN AND LEGALITY

This section must be completed for each specimen or item unless the information is identical for all specimens or items. Note that in each case you will have to choose one of the following origin: A- from the wild, B- from captive breeding or C- unknown.

In case of re-export, please complete one per supplier. Photocopy this section as needed.

Item Number _____

A - Complete this section if the live specimen or part/product came from the WILD:

Location of capture or removal:	Date of capture or removal:	Approximate age: For Plants: <input type="checkbox"/> seedling <input type="checkbox"/> juvenile <input type="checkbox"/> mature (flowering/fruiting)
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Note: Attach a copy of any permits required to capture or remove the specimen.

B - Complete the following section if the live specimen or part/product came from CAPTIVE BREEDING OR ARTIFICIAL PROPAGATION (zoo, breeding facility, nursery, greenhouse, farm, etc.):

Acquisition Date:			
Name of Establishment:		Is the establishment registered by CITES? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, the registration number:	
Street and Number:			Post Office Box:
City:	Province/Territory/Region:		Postal Code:
Country:	Website:	Email:	
Home Phone:	Work Phone:	Cell Phone:	Fax:

Complete the genealogy of the live animal (name and identification #) at the minimum to the 2nd generation (F2) born in captivity.

<table border="1"> <tr> <td>Specimen: Sex: <input type="checkbox"/> male <input type="checkbox"/> female Date of birth:</td> </tr> </table>				Specimen: Sex: <input type="checkbox"/> male <input type="checkbox"/> female Date of birth:			
Specimen: Sex: <input type="checkbox"/> male <input type="checkbox"/> female Date of birth:							
F1	<table border="1"> <tr> <td>Mother: Date of birth:</td> <td>Father: Date of birth:</td> </tr> </table>	Mother: Date of birth:	Father: Date of birth:				
Mother: Date of birth:	Father: Date of birth:						
F2	<table border="1"> <tr> <td>Mother: Date of birth:</td> <td>Father: Date of birth:</td> <td>Mother: Date of birth:</td> <td>Father: Date of birth:</td> </tr> </table>	Mother: Date of birth:	Father: Date of birth:	Mother: Date of birth:	Father: Date of birth:		
Mother: Date of birth:	Father: Date of birth:	Mother: Date of birth:	Father: Date of birth:				

Note : Attach a copy of a letter or birth certificate from the breeder indicating the birth date of the specimen and parents (F1 and F2).

C - Complete the following section if origin of live specimen or part/product is UNKNOWN:

Acquisition Date:	Context of acquisition (purchase, gift, etc.):	Country of acquisition:
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Has a CITES permit (Canadian or foreign) already been issued for this live specimen or part/product?

- No
 - Yes (Attach a copy of the permit)
- Permit number: _____

SECTION 7 TRANSPORT OF LIVE ANIMALS/PLANTS

Describe the method of transport (duration, cage, container, etc.):

Describe the facility where the animal/plant will be kept during your stay:

For Animals only, describe the security measures that will be in place to prevent escape and ensure public safety:

SECTION 8 CURRENT LOCATION OF THE SPECIMEN

Please check the appropriate box:

- In Canada
- Outside Canada
- Detained by: Canada Customs
- Foreign Customs

Provide the Customs file number and copies of letters exchanged with Customs

I do not have access to the Internet (www.cites.ec.gc.ca) and would like to receive a hard copy of the application form with my permit for future exports/re-exports. Yes No.

The undersigned hereby certifies that all information given in this application is true and correct

SIGNATURE OF APPLICANT: _____ **DATE:** ____/____/____
Year Month Day

CHECKLIST

- Did you sign the application?
- Did you answer all questions relevant to your specimen or product?
- Did you attach copies of requested documents?