



Dog Import Form

FORM APPROVED
OMB NO. 0920-1383
EXP DATE 5/31/2027

Fill out one form for each dog you are bringing into the United States. This form may be filled out by the importer or someone else acting on behalf of the importer. **Required fields indicated by a red asterisk (*)**

If you are having difficulty completing this form due to a disability, you or someone acting on your behalf, may contact CDC-INFO at <https://wwwn.cdc.gov/dcs/ContactUs/Form> or by calling 800-232-4636 (TTY 888-232-6348) for assistance.

Has the dog been in a country that is considered a high-risk country for dog rabies in the last six months? *

Yes No

Please verify using the link [High-Risk Countries for Dog Rabies](#).

Section A - Person Importing the Animal

First Name *

George

Middle Name/Initial

G

Last Name *

Smith

The person listed above is the: *

Owner Consignor (shipper) Flight Parent Other

Identification Type *

Passport Number

Drivers License Number

Air Waybill/Bill of lading number

Driver License Type *

US

International

Date of Birth (mm/dd/yyyy) *

02/02/1980

Identification No. *

123456789

Country or Area of Issuance *

Canada



Email *
ggg@xyz.com

Confirm Email *
ggg@xyz.com

Phone Number *
555-555-1212

*You will be sent a receipt at the email address you provide. You must present the receipt to U.S Customs and Border Protection and to the airline if your dog is traveling by air.

Consignee/Additional Owner (if different from above) *
Someone else

Email Address *
sss@xyz.com

Identification Type *
 Passport Number
 Drivers License Number

Driver License Type *
 US
 International

Country/Area of Issuance *
Canada

Identification No. *
123456789

Section B - Animal Information

Animal Name *
Rex

Age - Year
2

Month
1

Sex
Male Neutered

Breed
Alaskan Malamute

Color/Markings
Grey

- Importation Purpose *
- Personal Pet (this includes emotional support animals)
 - Commercial (rescue, resale, adoption, or other commercial purpose)
 - Service Animal
 - Government-owned animal



Education, Exhibition, or Research

Section C - Travel Information

Travel Type *

Air Sea Land

Country or Area of Departure *

Date of Arrival (mm/dd/yyyy) *

Canada

02/28/2025

Section D - Signature

The term "I" refers to the importer meaning the individual bringing the dog into the United States.

The information given in this application is complete and true to the best of my knowledge and belief.

I acknowledge there are additional requirements that must be met at the time of entry for dogs that have been in high-risk countries six months prior to entering the United States.

I understand that CDC reserves the right to request additional documentation verifying this information upon arrival in the United States.

I understand that any false statement knowingly and willfully made in connection with the application may subject me to criminal penalties under 18 U.S.C. § 1001.

I will comply with all applicable CDC import regulations and requirements.

Check one *

I am the importer. I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.

This form was prepared by someone authorized to act on behalf of the importer. The information on this form was provided by the importer. The importer acknowledges and agrees to the above Terms of Acceptance. Please sign below as follows: [Your Name] on behalf of [Name of Importer].

The receipt is valid for one dog to enter the United States multiple times within six months from the date of issuance.

Legal Signature: Typed First, Middle Initial and Last Name *

Signature Date (mm/dd/yyyy) *

George G Smith

02/04/2025



to a collection of information unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-1383

