



DEPARTMENT OF AGRICULTURE  
 VETERINARY SERVICES UNIT  
 DARVILLE'S COMPLEX, GLADSTONE & MUNNINGS ROADS,  
 NEW PROVIDENCE, THE BAHAMAS  
 Telephone: 1(242)-397-7450/1 Fax: 1(242)-325-3960  
 Email: [www.bahamas.gov.bs/agriculturemarine](http://www.bahamas.gov.bs/agriculturemarine)

**ENDORSEMENT  
 CERTIFICATE**

**APPLICATION FOR ENDORSEMENT CERTIFICATE FOR DOMESTIC  
 ANIMALS\* FROM THE COMMONWEALTH OF THE BAHAMAS**

(PLEASE PRINT CLEARLY AND COMPLETE THE ENTIRE FORM PER TYPE OF ANIMAL TO PREVENT PROCESSING DELAYS)

OWNER'S NAME: \_\_\_\_\_

CONSIGNEE NAME: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ (HOME/WORK) ( ) \_\_\_\_\_ (CELL) FAX No.:( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_ WILL THE ANIMAL RETURN TO THE BAHAMAS?  YES  NO

TYPE OF ANIMAL: \_\_\_\_\_ BREED: \_\_\_\_\_ AGE: \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS

COUNTRY OF BIRTH OF ANIMAL: \_\_\_\_\_ SEX:  MALE  FEMALE NEUTERED?  YES  NO

COMMON NAME (if applicable): \_\_\_\_\_ Scientific Name (if applicable): \_\_\_\_\_

MICROCHIP TYPE \_\_\_\_\_ MICROCHIP NO. \_\_\_\_\_

PURPOSE OF EXPORTING ANIMAL:  PET  SERVICE ANIMAL  VACATION  OTHER: \_\_\_\_\_

EXPECTED ISLAND AND PORT OF DEPARTURE IN THE BAHAMAS \_\_\_\_\_

DESTINATION COUNTRY AND IN-TRANSIT COUNTRY(IES): \_\_\_\_\_

\_\_\_\_\_ ANTICIPATED DATE OF DEPARTURE (dd/mm/yyyy): \_\_\_\_\_

PORT OF ENTRY IN DESTINATION COUNTRY: \_\_\_\_\_

\*DOMESTIC ANIMAL MEANS PETS (DOG, CAT, BIRD, GUINEA PIG, HAMSTER, RABBIT AND FRESH WATER TURTLE). NB. IF IN DOUBT, PLEASE CONTACT THE DEPARTMENT OF AGRICULTURE VETERINARY OFFICERS FOR CLARIFICATION ON DOMESTIC ANIMAL SPECIES ALLOWED TO BE IMPORTED

PROCESSING FEE: ALL ANIMAL PERMIT APPLICATIONS  
 – \$10.00 (USD/BSD) PER PERMIT PLUS  
 10% VAT OF PROCESSING FEE  
 (TOTAL OF \$11.00 (USD/BSD) PER  
 PERMIT PROCESSING FEE).

PLEASE NOTE: NO PERSONAL CHEQUES OR CASH  
 IN THE MAIL. WE ARE NOT  
 RESPONSIBLE FOR CASH LOST IN  
 THE MAIL. INTERNATIONAL MONEY  
 ORDER ONLY

SUBMISSION: BY HAND (NEW PROVIDENCE OFFICE  
 OR FAMILY ISLAND  
 ADMINISTRATOR'S OFFICE)

NB: OFFICE HOURS 9:00 A.M.–5:00 P.M.  
 (EST) MONDAY–FRIDAY (EXCEPT  
 PUBLIC HOLIDAYS)

**COMPLETE APPLICATION CAN TAKE US 48 BUSINESS HOURS TO  
 PROCESS.**

**PET ANIMAL MUST BE 6 MONTHS OF AGE TO LEAVE THE  
 BAHAMAS**

**SUPPORTING DOCUMENTS (IN ENGLISH) TO SUBMIT ALONG WITH  
 THIS APPLICATION FORM:**  
 (A) HEALTH CERTIFICATE/DOCUMENTATION  
 (B) ENDORSEMENT DOCUMENTATION FOR AUTHORIZED OFFICERS  
 (C) COLOR PHOTOGRAPH OF THE ANIMAL  
 (D) ANY OTHER SUPPORTING DOCUMENTATION AS AUTHORIZED  
 OFFICERS REQUIRE.

**NB. INSPECTION MAY BE REQUIRED PRIOR TO DEPARTING THE  
 BAHAMAS BY GOVERNMENT AUTHORIZED VETERINARIANS AND  
 FEES MAY BE APPLIED AND WILL BE VERIFIED BY AUTHORIZED  
 OFFICERS.**

**IMPORTER DECLARATION:** Please note that this application will not be processed without completing this Declaration.

I/We

- **Declare** that the information provided in this application is true, correct and accurate to the best of m/our knowledge;
- **Agree** to pay the processing fee regardless of issue status and all cost associated with the importation of the animals listed on this application; and
- **Agree** that the responsible Government Agency in The Bahamas reserves the right to deny any application where reasonable grounds have determined the import will be detrimental to the health and welfare of animals, the public, or non-compliant with the international or national laws and regulations.

DATE (dd/mm/yyyy): \_\_\_\_\_ PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

OFFICIAL USE ONLY  Approved  Denied  On Hold by: \_\_\_\_\_ Reason: \_\_\_\_\_

REV. JULY 2023 DATE (dd/mm/yyyy): \_\_\_\_\_ SIGNATURE \_\_\_\_\_ PRINT NAME: \_\_\_\_\_