FAX TRANSMISSION

|  |  |
| --- | --- |
| TO |  |
| DATE |  |
| FROM |  |
| TELEPHONE NO. |  |
| FAX NO. |  |
| E-MAIL ADDRESS |  |
| NAME OF PET OWNER(if different from person sending FAX) |  |
| SCHEDULED DATE OF IMPORT/EXPORT |  |

TO WHOM IT MAY CONCERN,

PLEASE FIND FOLLOWING DOCUMENTS.

□ APPLICATION FOR EXPORT

□ ADVANCE NOTIFICATION FOR IMPORT

□ OTHER:

TOTAL PAGES: (INCLUDING THIS PAGE)