



**2020-21 Application for  
Permit Governing the Importation  
of Poultry and Hatching Eggs into the State of Iowa**

**Section 1 – Applicant**

Company: \_\_\_\_\_ Name: \_\_\_\_\_

**Address:**

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

I hereby apply to the Iowa Poultry Association for permission to ship the following into the state of Iowa.  
Please check all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Egg-type chicken hatching eggs<br><input type="checkbox"/> Turkey hatching eggs***<br><input type="checkbox"/> Waterfowl hatching eggs<br><input type="checkbox"/> Exhibition hatching eggs<br><input type="checkbox"/> Game bird hatching eggs<br><input type="checkbox"/> Egg-type chicks<br>Other _____ | <input type="checkbox"/> Meat-type chicken hatching eggs<br><input type="checkbox"/> Meat-type chicks<br><input type="checkbox"/> Game birds less than 8 weeks<br><input type="checkbox"/> Exhibition birds less than 8 weeks<br><input type="checkbox"/> Waterfowl less than 8 weeks<br><input type="checkbox"/> Turkey poults ***<br><input type="checkbox"/> Egg-type pullets |
|---|--|
- \*\*\*All turkey products must be MG Clean per state code

I am familiar with the rules and regulations governing the importation of poultry and hatching eggs into the state of Iowa and agree to comply with the same.

\_\_\_\_\_  
Signature of Breeder or Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print the above name

\_\_\_\_\_  
NPIP Number

**Section 2 – NPIP State Agent**

**NPIP State Agency:** The status of the above checked products must be indicated below, or permit will not be processed. The above applicant is a NPIP participant and has obtained a classification in the following

- |  |   |
|--|---|
| <input type="checkbox"/> U.S. Pullorum-Typhoid Clean<br><input type="checkbox"/> U.S. M. Gallisepticum Clean *<br><input type="checkbox"/> U.S. Avian Influenza Clean<br><input type="checkbox"/> U.S. SE Clean<br>Other _____ | <input type="checkbox"/> U.S. Salmonella Monitored<br><input type="checkbox"/> U.S. M. Synoviae Clean<br><input type="checkbox"/> U.S. H5/H7 Avian Influenza Monitored<br><input type="checkbox"/> U.S. H5/H7 Avian Influenza Clean |
|--|---|

\*MG Clean is required to ship turkeys into Iowa.

\_\_\_\_\_  
Signature of NPIP Official State Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

**OFFICE USE ONLY**

PermitNo.: 11- \_\_\_\_\_

Expires: 06/30/2021