



**APPLICATION FOR PERMIT TO IMPORT A DEAD WILD ANIMAL**  
**A \$20.00 permit fee must accompany this application.**

- Allow 28 working days for this application to be processed.
- This application will not be processed unless the required fee is attached.
- Your cheque or money order should be made payable to "The Minister of Finance."
- An import permit may not be required under certain circumstances. If a permit is not required the fee will be refunded.
- A true copy of the original hunting licence, possession permit or trapping licence/permit for each item must be attached.
- For information on this or any other permit contact the WILDLIFE PERMITS CLERK at 431-276-8352

**2023 - NEW ADDRESS!**

SEND COMPLETE APPLICATION AND FEE TO:

The Cashier  
Natural Resources and Northern  
Development  
Room 118 – 1181 Portage Ave  
Winnipeg MB R3G 0T3

OR PERSONALLY TAKE IT TO ANY MANITOBA  
DISTRICT OFFICE WHERE A CONSERVATION  
OFFICER IS LOCATED

NAME OF APPLICANT :		ORIGIN :	
ADDRESS:		ADDRESS:	
CITY/TOWN:	PROVINCE/STATE:	CITY OR TOWN:	PROVINCE/STATE:
POSTAL/ZIP CODE:	TELEPHONE NUMBER(S): (RESIDENCE) (BUSINESS)	POSTAL/ZIP CODE:	TELEPHONE NUMBER(S): (RESIDENCE) (BUSINESS)

ORIGIN: (IF SHIPMENT HAS MULTIPLE ORIGINS PROVIDE DETAIL)		PERMIT TYPE AND NUMBER:
MANITOBA <input type="checkbox"/> YES <input type="checkbox"/> NO	OTHER: _____ (NAME OF ORIGINATING JURISDICTION)	_____
LIST QUANTITY AND SPECIES AND PRODUCT (DESCRIBE ACCURATELY AND COMPLETELY. ATTACH ADDITIONAL SHEETS IF SPACE IS INSUFFICIENT.):		<b>CASHIER VALIDATION BOX (FOR OFFICE USE ONLY)</b>

STATUS AND FORM OF ANIMAL(S):	
<input type="checkbox"/> DEAD (RAW)	<input type="checkbox"/> DEAD (PROCESSED) <input type="checkbox"/> OTHER (SPECIFY): _____
AUTHORITY TO POSSESS (CHECK ONE AND ENTER APPLICABLE NUMBER – COPIES OF DOCUMENTS IN SUPPORT OF ORIGIN ARE REQUIRED):	
<input type="checkbox"/> FUR DEALER'S LICENCE NO.: _____	<input type="checkbox"/> TAXIDERMIST'S LICENCE NO.: _____
<input type="checkbox"/> TANNER'S LICENCE NO.: _____	<input type="checkbox"/> MB HUNTING/TRAPPING LICENCE NO.: _____
<input type="checkbox"/> LICENCE/PERMIT FROM OTHER JURISDICTION: _____	_____
	(NAME OF JURISDICTION) (LICENCE TYPE AND NUMBER)

I hereby certify that the information provided herein is complete and accurate to the best of my knowledge, and that the listed animal(s) or part(s) thereof are not currently in Manitoba; and request that a permit to import the said wild animal(s) or part(s) thereof be issued to me.

DATE SIGNED:

SIGNATURE OF APPLICANT: