



དཔལ་ལྷན་འབྲུག་གཞུང་། གསོ་བ་ལྷན་ཁག འབྲུག་བཟའ་ཚས་དང་སློན་རིགས་དབང་འཛིན།

**ROYAL GOVERNMENT OF BHUTAN
MINISTRY OF HEALTH
BHUTAN FOOD AND DRUG AUTHORITY
INSPECTION SERVICES**



APPLICATION FORM FOR IN-COUNTRY MOVEMENT LIVE ANIMAL AND LIVESTOCK PRODUCTS

To
Officer In-Charge
Bhutan Food and Drug Authority
Ministry of Health
_____ Dzongkhag

The undersigned hereby applies for a permit authorizing the movement of Live animal /Livestock products as per details given below:

Sl.No.	Particular	Species	Breed	Quantity

**Use additional sheet if required.*

Name of owner and address:	
Citizenship ID No:	
Source/Origin of product:	
Purpose of movement:	
Date of movement (travel):	
Date of arrival at destination:	



དཔལ་ལྷན་འབྲུག་གཞུང་། གསོ་བ་ལྷན་ཁག་འབྲུག་བཟའ་ཚེས་དང་སློན་རིགས་དབང་འཛིན།

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Movement from (Dzongkhag & Gewog):	
Destination (Dzongkhag & Gewog):	
Means of conveyance/vehicle No	

Name & Signature of Applicant
Date:

**Application to be signed by the Head of the Institution*

Doc. No: BFDA-IS-FM-193	Prepared by: Technical Focal	Approved by: Division Head	Page 2 of 2
Issue No: 02	Issue Date: 15March 2023	Revision No: 00	Revision Date: --