



Department of Environmental and Natural Resources

Application for Permit to Import Plant Material

All plant material arriving in Bermuda must be accompanied by an Import Permit issued by the Department of Environmental Protection and a Phytosanitary Certificate issued in the country of origin. Imports arriving without these papers will not be accepted.

The following are prohibited entry:

- Any plants or propagating material thereof which can be grown true and readily from seed.
- *Althaea*, all propagating material except seed;
- Carrots in raw untreated state (seed permitted);
- *Citrus* spp., all propagating material except seed;
- Corn (*Zea mays*) and sorghum, all raw parts except loose grain;
- Carnation (*Dianthus* spp.), all propagating material except seed from England;
- *Hibiscus* spp., all propagating material except seed;
- Sweet potatoes, morning glories (*Ipomoea* spp.), all propagating material except seed;
- Bananas, plantains (*Musa* spp.) excluding fruit;
- Oleander (*Nerium* spp.), except seed;
- Palmae (all members), all parts and seed except husked coconuts;
- Soil.

Quantity	Botanical Name of Plants (Must include Genera <u>and</u> species)	Plant Propagative Unit: Seeds, bulbs, cuttings, plants (specify rooted or unrooted). For rooted plants please specify artificial media or oasis wedge.

(Use reverse side if more space is needed)

Country and locality in which grown or produced: \_\_\_\_\_

If obtained from nursery give name and address: \_\_\_\_\_

Importation by:  Hand Baggage  Air Freight  Ocean Freight  Mail

Name of Applicant (Please Print): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Signature of Applicant or Agent: \_\_\_\_\_

For Departmental Use Only:

Permit No.: \_\_\_\_\_

Date: \_\_\_\_\_



GOVERNMENT OF BERMUDA  
Ministry of Health, Seniors and Environment

**Department of Environmental and Natural Resources**

**CHRISTMAS TREE CONTAINER ARRIVALS FORM**

**Importer:** \_\_\_\_\_

**Exporter:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Name of Person(s) meeting the Plant Protection Personnel at the Hamilton Docks:**

\_\_\_\_\_

**Contact number(s) for the above mentioned person/s:**

\_\_\_\_\_

**Shipping date:** \_\_\_\_\_

**Number of containers:** \_\_\_\_\_

Date of Arrival	Vessel	Container #	Seal #	# of Trees	# of Wreaths

- **Please note: Information must be filled in completely. Failure to comply will result in delayed inspection.**



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**CHRISTMAS TREE PRE-INSPECTION REQUEST FORM**

**\*\* PLEASE NOTE: ONCE YOU HAVE COMPLETED THIS FORM AND RETURNED IT TO THE PLANT PROTECTION LABORATORY, YOU ARE COMMITTED TO PAY THE PRE-INSPECTION COSTS, REGARDLESS OF ANY CHANGES TO YOUR ORDER\*\***

Importer	
Contact Person	Email:
Address	
Contact Numbers	Tel: Fax:
Exporter/Tree Supplier	
Contact Person	Email:
Address	
Contact Numbers	Tel: Fax:
Number of lots to be inspected (No more than two)	
Plantation / Tree Location(s) To Be Inspected	
Quantity and Type of trees	

I agree to pay the pre-inspection costs requested by this Department.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

- Upon completion please fax to 232-4866 or 236-7582 along with your application.