## **REGISTRATION FORM**

To:

State Veterinary Authority
State Veterinary Service Headquarters
Department of Agriculture
Lot 877, Semenggok Road
Off 12<sup>th</sup> Mile, Kuching-Serian Road
93250 KUCHING

or your nearest Divisional Veterinary Office

Note: \* Please strike whichever not applicable

## Re: Registration As Importer / Exporter of Birdnest

I, the undersigned would like to register my \*company / myself with State Veterinary Authority as importer / exporter of birdnest. Below is the detail:

For	In	di	vi	dı	ual
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1. Name of Applicant (Full Name as in I.C)	:			
2. Identity Card No. (Photocopy required)	:			
3. Address	:			
4. Postcode	:			
5. Telephone No.	:	6. Mobile No.:		
7. Fax No.	:			
For Individual				
1. Name of Applicant (Full Name as in I.C)				
2. Name of Owner / Board	of Director:			
3. Telephone No.		4. Mobile No.:		
5. Fax No.				
6. Email Address				