



GOVERNMENT OF BERMUDA
Ministry of Health, Seniors and Environment

Department of Environment and Natural Resources

APPLICATION FOR RELEASE FORM

**DO NOT RELEASE PLANTS TO CUSTOMERS
PRESENTING THIS FORM**

Please complete this form, attach a copy of the full invoice and fax or deliver this information to the Plant Protection Laboratory for processing. We will contact you to pick up your release form.

IMPORTER:	
CONTACT PERSON:	
CONTACT NUMBER:	
PERMIT NUMBER:	
Release form #:(Office use only):	

COUNTRY/STATE OF ORIGIN:	
EXPORTER:	
NATURE OF SHIPMENT:	
QUANTITY OF PLANTS OR NO. OF BOXES:	
DATE OF ARRIVAL:	
AIRLINE:	
FLIGHT NUMBER:	

Plant Protection Laboratory
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