



Iowa Poultry
ASSOCIATION
ncentralpoultry.com

**2025-26 Application for
Permit Governing the Importation
of Poultry and Hatching Eggs into the State of Iowa**

Section 1 – Applicant

Company: _____ Name: _____

Address:

Street: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Mobile: _____

E-mail: _____

I am familiar with the rules and regulations governing the importation of poultry and hatching eggs into the state of Iowa and agree to comply with the same.

Signature of Breeder or Owner

Date

Please type or print the above name

NPIP Number

Section 2 – Shipping State Agent

The status of the above checked products must be indicated below or permit will not be processed. The above applicant is a NPIP participant and has obtained a classification in the following diseases:

- ☐ U.S. Pullorum-Typhoid Clean State
- ☐ U.S. M. Gallisepticum Clean *
- ☐ U.S. Sanitation Monitored
- ☐ U.S. SE Clean

- ☐ U.S. Pullorum-Typhoid Clean
- ☐ U.S. M. Synoviae Clean
- ☐ U.S. H5/H7 Avian Influenza
- ☐ Clean

Signature of NPIP Official State Agent

Date

Title

OFFICE USE ONLY
Permit No.: 11- _____
Expires: 8/31/2026

Iowa Poultry Association – National Plans Division

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