

## UNITED STATES DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE FRUIT AND VEGETABLE PROGRAMS FRESH PRODUCTS BRANCH

*REQUES	T FOR:	INSPECTION					REINSPECTION		APPEAL INSPECTION		
(This is the only acceptable form for fax or electronic submission to USDA for inspection requests)											
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NOTE: Fill in all appropriate blocks; blocks with "*" must be completed. Inspection may be delayed because of incomplete information. Type of Inspection must be selected above.											
*Applicant's (Company) Name:							*Date:				
*Street Address:									*Time:		
	te & Zip:										
	t Person:					Type of Carrier:					
*Phone Number:										Car Number or	
		*E-Mail Address:						Type:		License Number:	
Enter when		*Shipper	's Name:					$\Box$ C	ar:		
different		City a					Trailer:				
from		Receiver	's Name:		Lot Inspection					on	
Applicant:		City a									
	oduct(s):					Applicant's P.O. Number:					
Lots Separated by (Optional):						Inspection Requested For (Must select at least one):					
PLI Nut		Quality and Condition (including size when applicable)									
Grower			Condition Only								
Size			Size								
Other, S	<b>7.</b>	1	Net Weight								
Digital Images Requested: Yes				No	Other, Specify:						
Products To Be Inspected											
*PRODU	CTS	BRANDS/MARKS		*QUANTI	TY Type C		Type Container		*Size	Type/Variety	
							†				
							1				
Remarks/Special Instructions;											