

U.S. DEPARTMENT OF AGRICULTURE
 AGRICULTURAL MARKETING SERVICE
 POULTRY PROGRAMS

PLACE ISSUED:

IMPORT REQUEST (SHELL EGGS)

INSTRUCTIONS: See reverse of Part 5 of this set on how to complete form.

SECTION A - APPLICATION FOR IMPORT INSPECTION OF SHELL EGGS			SECTION D - AGREEMENT FOR TEMPORARY TRANSFER OF FOREIGN EGGS															
1. NAME AND ADDRESS OF CUSTOMS BROKER OR APPLICANT			IN CONSIDERATION of the U.S. Collector of Customs granting me (us) permission to transfer temporarily the products described in Section "C" which are offered for entry into the United States, I (WE) AGREE under bond filed with said Collector of Customs and subject to the penalties prescribed in laws enacted by Congress and regulations issued thereunder by the Secretary of the Treasury, to hold the said products intact at the location indicated below until they have been inspected and passed by a Poultry Programs Representative or have been otherwise disposed of under the supervision of a U.S. Customs Officer or a Poultry Programs Representative.															
2. PRESENT LOCATION OF PRODUCT		3. DATE																
SECTION B - NOTICE OF PRODUCTS SHIPPED UNDER SEAL			1. PLACE TO WHICH PRODUCT IS TO BE TRANSFERRED		2. DATE													
1. FROM <i>(Customs station or port of entry)</i>	2. DATE FORWARDED	3. TO <i>(Point of Inspection)</i>	3. NAME OF COMPANY															
4. SEALS <i>(Check one)</i> <input type="checkbox"/> TREASURY <input type="checkbox"/> POULTRY PROGRAMS		SEAL NUMBERS																
5. SIGNATURE OF <i>(Check one)</i> <input type="checkbox"/> CUSTOMS OFFICER <input type="checkbox"/> POULTRY PROGRAMS REPRESENTATIVE		6. DATE	4. SIGNATURE AND TITLE OF COMPANY REPRESENTATIVE															
SECTION C - IDENTIFICATION OF SHIPMENT			5. APPROVED BY POULTRY PROGRAMS REPRESENTATIVE		6. DATE													
1. COUNTRY OF ORIGIN		2. CUSTOM ENTRY NO.	7. APPROVED BY U.S. CUSTOMS OFFICER															
3. VESSEL OR CAR NO. AND INITIALS		4. NAME AND ADDRESS OF TRANSPORTATION COMPANY																
8. DATE			SECTION E - DISPOSITION															
			1. PLACE OF INSPECTION															
5. ARRIVAL DATE		6. SHIPPING MARK AND NUMBERS	2. CERTIFICATION FOUND CORRECT <input type="checkbox"/> YES <input type="checkbox"/> NO															
7. NAME OF CONSIGNOR		8. PORT OF ARRIVAL	3. EXAMINATION ORDER OR OTHER ACTION TO BE TAKEN <input type="checkbox"/> RELEASED BY AGRICULTURAL MARKETING SERVICE, USDA															
9. NAME AND ADDRESS OF CONSIGNEE			4. SIGNATURE OF REPRESENTATIVE		5. DATE													
			REFUSED ENTRY AND/OR DETAINED															
KIND OF PRODUCT			Initials If Passed	NUMBER OF CONTAINERS	QUANTITY <i>Total Dozens</i>	CAUSE AND DISPOSITION												
			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">SHELL EGGS</td> <td style="width: 20%;">A. RESTRICTED EGGS <i>(Properly labeled)</i></td> <td style="width: 15%;">NUMBER OF CONTAINERS</td> <td style="width: 15%;">QUANTITY <i>Total Dozens</i></td> <td style="width: 15%;">CAUSE AND DISPOSITION</td> </tr> <tr> <td></td> <td>B. NON-RESTRICTED</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>C. FOR HATCHING PURPOSES</td> <td></td> <td></td> <td></td> </tr> </table>				SHELL EGGS	A. RESTRICTED EGGS <i>(Properly labeled)</i>	NUMBER OF CONTAINERS	QUANTITY <i>Total Dozens</i>	CAUSE AND DISPOSITION		B. NON-RESTRICTED					C. FOR HATCHING PURPOSES
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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0113. The time required to complete this information collection is estimated to average .33 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The authority for requesting the information to be supplied on this form is the Egg Product Inspection Act (21 USC 1031-1056). A request must be made by anyone wishing to import shell eggs. The information is essential to control the movement and disposition of the imported products (7 CFR 59.920).

**IMPORT REQUEST
(SHELL EGGS)**

INSTRUCTIONS FOR COMPLETION AND DISTRIBUTION: *Importers or their agents may obtain copies of this form from nearest Poultry Programs office.*

IMPORTER

When Inspection is at Point of Entry:

1. **No. of Copies** - Prepare and submit original and 4 copies to local office of Poultry Programs, AMS. 1/
2. **Completion** - Section "A" and "C" to be completed by importer or person acting as his/her agent.
3. **Transfers** - Complete Section "D" if product is to be inspected at a point other than at its present location (*example: Movement from warehouse at docks to another warehouse*).

When Inspection is at Destination:

1. **Completion** - Complete Sections "A", "C", and "D".
2. **Distribution** - Submit all copies to local office of Poultry Programs, AMS. 1/

POULTRY PROGRAMS REPRESENTATIVE

1. **General** - Insert place issued in space provided at top of form.
2. **Transfers** - Sign and date form (Items 5 and 6, Section "D") if product is to be transferred temporarily.
3. **Inspection at Destination** - If product is to be shipped to another point for inspection, complete Section "B." Be sure to record seal numbers (Item 4).
4. **Approvals** - Complete Section "E" and place initials after item(s) passed. If product is refused entry or detained, give brief explanation under "Cause and Disposition," date and sign form, Section "E," Items 4 and 5).

CUSTOMS OFFICIAL

1. **Transfers** - Sign Item 7, Section "D," if product is approved for temporary transfer; date form (Item 8).
2. **Inspection at Destination** - Unless already completed by Poultry Programs representative, complete Section "B" if shipment is made to another point for inspection; sign and date form (Items 5 and 6). Be sure to record seal numbers if these were affixed.
3. **Distribution** - Prepare and submit all copies to local office of Poultry Programs, AMS. 1/

1/ *If there is no local Poultry Programs office, send copies to Chief, Grading Branch, Poultry Programs, AMS, U.S. Department of Agriculture, 1400 Independence Ave., S.W., STOP 0258, Washington, D.C. 20250.*

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