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 0583-0082. The time required to complete this information collection is estimated to average 10 minutes 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.

U.S. DEPARTMENT OF AGRICULTURE FOOD SAFETY AND INSPECTION SERVICE

ADDITION FOR FEDERAL INSPECTION

Instructions: Submit this application to the District/Regional Office, Food Safety and Inspection Service, U.S. Department of Agriculture for import inspection requests. Complete all sections. If a section is not applicable, enter "N/A" or "None." If additional space is needed for any item, attach sheet and number the item

	g Product, Catfish and Impo	1	nter "N/A" or "None." If additional space is neet and number the item.	s needed for any item, attach	
SECTION I.	ESTABLISHMENT INFORMA	· ,			
Date of Application	of Application 2. Type of Application				
	New Change of Ownership Change of Location Application Extension				
3. Type of Inspection Required	(Check box)	4. Form of Organization (C	Check box)		
Meat Poultry Egg Product Import		Individual Cooperative Association Partnership Corporation LLC			
5. If Corporation, Name of Sta	ate Where Incorporated	6. Address of Corporate Headquarters		7. Date Incorporated	
Name of Applicant and Mailing Address (include zip code)		9. Federal Employer ID#		11. Area Code and Telephone Number	
		10. Dun & Bradstreet #		12. Firm's Code (Import Only)	
13. Actual Name of and Physical Address of Plant		14. Mailing Address if Diffe	erent from Item 8 (include zip code)	15. Area Code and Telephone Number	
10.40 11: 11 5 11:11					
16. Attach Limits of Establishin	nent Premises to be under Fed	leral inspection (<i>for egg plai</i>	nts attach blueprint)		
17. Name and Establishment establishments located in		18. Doing Business As			
19. Month and Year when establishment will be ready to open		rate under inspection 20. Comments			
SECTION II. TYPE OF OPERATION					
MEAT AND POULTRY INSPE		I that apply.)			
21 A. Animals to be slaughter a Beef Guineas D. Raw - Ground (I	red when inspecting is inaugeral Sheep Goats Squab Ratites Non-Intact Products)) Chicken Turkeys	Goose Ducks	
Traw Not Ground (mast Froduct)					
,					
f. Heat Treated - S					
g. Fully Cooked -	Not Shelf Stable				
h. Heat Treated bu	it Not Fully Cooked - Not Shelf	Stable			
i. Product with Secondary Inhibitors - Not Shelf Stable					

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EGG PRODUCTS INSPECTION

21 B.	Check the type of product intended for inspection at the establishment (Check all that apply)			
a.	Shell Egg Breaking			
b	Thermally Processed (Pasteurized heat treated)			
	Cans/Pails Flexible Pouches Jars Cartons Bag-n-Box Totes Tankers Other			
C.	Not Heat Treated - Unpasteurized egg product only			
d.	Heat Treated - Shelf Stable (Dried egg product, 50% Sugar Yolk)			
e.	Heat Treated But Not Fully Cooked - not shelf stable (liquid and frozen egg products)			
IMPC	ORT INSPECTION			
21 C.	Species (Check all that apply)			
	Meat Poultry Egg Products Catfish			
22. Check the type of product intended for inspection at the establishment (Check all that apply)				
a.	Raw - Non-Intact			
	Ground Other Non-Intact			
b.	Raw - Intact			
	Carcasses: Beef Veal Goats Pork Sheep Lamb			
	Mutton Equine Poultry Ratites			
	Other: Cuts Boneless Manufacturing Meats Other Intact			
C.	Thermally Processed Commercially Sterile			
	Cans Flexible Pouches Trays Jars			
d.	Not Heat Treated - Shelf Stable			
e.	Heat Treated - Shelf Stable			
f.	Fully Cooked - Not Shelf Stable			
	Frozen from an APHIS restricted country (9CFR 94.4(b)) Frozen Perishable			
g.	Heat Treated But Not Fully Cooked - Not Shelf Stable			
h.	Product with Secondary Inhibitors - Not Shelf Stable			
i.	Shell Eggs/Egg Products			
	Shell Eggs Liquid Frozen Dried			
23.	Mode of Transportation - Import Inspection Only (Check all that apply)			
	Tankers Rail Cars Trucks Ocean Vessel Airline Other (Specify)			

FSIS Form 5200-2 (2/15/2011) Page 3 SECTION III OWNERSHIP AND MANAGEMENT INFORMATION 24. List all persons responsibly connected with the applicant. Include all owners, partners, officers, directors, holders or owners of 10 per centum or more of voting stock and employees in a managerial or executive capacity in the business. Notify the Division Director or import Inspection Division Director of any changes in the listing given. HOLDER OF 10% OR Name and Title Present Home Address (Title - Indicate if partner or manager) (Street and Number, City, State, Zip Code) MORE VOTING STOCK (If Corp.) YES NO 25. Enter the name of each person listed under Item 24 who has been convicted in any Federal or State court of any felony. Enter the name of each person listed under item 24 who has been convicted in any Federal or State court of more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime, the date of conviction and the court in which convicted. If none write "None." 26. List each conviction against the applicant (person, firm or corporation) in any Federal or State court of any felony, List each conviction against the applicant (person, firm or corporation) in any Federal or State court of more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime, the date of conviction and the court in which convicted. If none write "None." 27. Sanitation Standard Operating Procedures have been developed for the establishment in accordance with §416.12 of the regulations. YES

(Check one)

TO BE COMPLETED BY USDA, FSIS

35. Signature of DM or IID Director

YES

YES

30. Signature

31. Title

36. Date

NO

NO

28. Applicant has been provided with a copy of this Privacy Act Notice.

32. Is this establishment presently under state inspection? (OFO only)

33. Is this establishment to be under Talmadge-Aiken Act? (OFO only)

29. Typed name of person signing application

34. Official inspection number reserved