

U.S. DEPARTMENT OF AGRICULTURE
GRAIN INSPECTION, PACKERS AND
STOCKYARDS ADMINISTRATION
FEDERAL GRAIN INSPECTION SERVICE
APPLICATION FOR INSPECTION AND
WEIGHING SERVICES

According to the Paperwork Reduction Act of 1995, no persons are 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 0580-0013. The time required to complete this information collection is estimated to average 5 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.

Pursuant to Section 7 and 7a of the United States Grain Standards Act as amended (7 U.S.C. 79 and 79a) and the regulations thereunder (7 CFR 800 et. seq.) and/or Section 203(h) of the Agricultural Marketing Act of 1946, as amended (7 U.S.C. 1622) and the regulations and standards thereunder (7 CFR Parts 57 and 868), we apply for services described below.

1. Type of Services (check all that apply) <input type="checkbox"/> Original Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Appeal Inspection <input type="checkbox"/> Official Weighing <input type="checkbox"/> Review of Weighing <input type="checkbox"/> Board Appeal Inspection <input type="checkbox"/> Supervision of Weighing <input type="checkbox"/> Retest		2. Where are the services to be performed (check one) <input type="checkbox"/> United States <input type="checkbox"/> Canada
3. Kind of Official Inspection Service Requested (check all that apply) <input type="checkbox"/> Official Sample Lot <input type="checkbox"/> Submitted Sample <input type="checkbox"/> Checkweigh/Checkload/Checkcount <input type="checkbox"/> Sampling <input type="checkbox"/> Official Weighing <input type="checkbox"/> Supervision of Weighing <input type="checkbox"/> Stowage Examination <input type="checkbox"/> Grade and Factor <input type="checkbox"/> Official Commercial <input type="checkbox"/> Condition <input type="checkbox"/> Factors Only <input type="checkbox"/> Other Criteria (list in remarks)		
4. Type of Grain/Commodity	5. Location of Grain/Commodity	6. Contract Number (if applicable)
7. Carrier or Other Identification	8. Quantity (specify in pounds, bushels, etc.)	9. Contract Grade (Factor or Specifications)
10. Number and Kind of Containers	11. Container Markings	12. Appeal Request <input type="checkbox"/> File Sample <input type="checkbox"/> New Sample
13. Name, Address and Telephone Number of Applicant (Firm Name)		14. Name and Address of Interested Party (agent, consignee)
13a. Applicant GIPSA Account Number: <i>Ba. Applicant GIPSA Account Number:</i>		

~~13a. Applicant Tax id Number:~~

15. Remarks

In submitting this application, we expressly agree that the fees and charges for the inspection and weighing services shall be assessable to and payable by us in accordance with the fees and charges described in the regulations (7 CFR 800 et. seq.) under the United States Grain Standards Act and/or described in the regulations (7 CFR 868) under the Agricultural Marketing Act of 1946. I declare that the foregoing statements are true to the best of my knowledge, information and belief.

16. Date (mm/dd/yy)	17. Name of Firm	18. Signature of Person Making Application
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Warning: Attempts to influence any official personnel with respect to the performance of his/her duties under the U.S. Grain Standards Act may upon conviction thereof, be subject to imprisonment for not more than 5 years and/or a fine of not more than \$20,000. 18 U.S.C. 1001 provides for a fine of not more than \$10,000 or imprisonment for not more than 5 years, or both, for false or fraudulent statements made to an agency of the United States. The offering of any gratuity, as described in 7 CFR 800.187, will be deemed an attempt to influence official inspection personnel.

For Use by FGIS

19. Application Received By	20. Date (mm/dd/yy)	21. Field Office	22. Fees
23. Certificate No. or Nos.		24. Remarks	

ok
2018
The new package expires January 2018

Instructions for Completing Form FGIS 907
"Application for Inspection and Weighing Services."

- A. Action by Applicant. Complete items 1 through 18. Return the original to the appropriate FGIS field office and retain a copy for your records.
1. Check the box for the services needed. More than one box may be checked if a combination of services is requested.
 2. Check the appropriate box to indicate whether the service is to be performed in the United States or Canada.
 3. Check the box indicating the kind and scope of service being requested. For checkweigh, checkload, checkcount services use the remarks section for the specific service requested. Also, for condition of container examinations use the remarks section for this specific service.
 4. Enter the type of grain or commodity for the service being requested.
 5. Enter the location of the grain or commodity for the service being requested.
 6. Enter the contract number if applicable.
 7. Enter the carrier or identification for the service being requested.
 8. Enter the quantity in pounds, bushels etc., for the grain or commodity to be inspected.
 9. For inspections during loading, enter the contract grade along with any special grade or other contract requirements. This information is not applicable to carriers that are to be inspected at rest.
 10. Enter the number and kind of containers.
 11. Enter the container markings, use the words: "Standard", "Commercial", or "Special" for the type of markings. For "Special" enter the complete container markings in the remarks section. If there are no markings enter "None". For bulk rice, enter "Bulk".
 12. Check the box indicating the type of sample required:
 13. Enter the name and address of the applicant; i.e., the party that will be billed for the service.
GIPSA Account
 - 13a. Enter the applicant's ~~Tax Id~~ number.

14. If applicable enter the name and address of the agent or person of interest if any.
 15. Enter additional information if necessary.
 16. Enter the date the application was prepared.
 17. Enter the name of the firm that is requesting the service.
 18. Enter the name and signature of the person completing the application.
- B. Action by field office. Review Form FGIS 907. If incomplete, either return the form to the applicant for completion or insert and initial the missing information. Complete items 19 through 24:
19. Enter the name of the person who received the application.
 20. Enter the date the application was received.
 21. Enter the name of the field office where the application was filed.
 22. Enter the amount of fees that are to be assessed.
 23. Enter the inspection certificate(s) numbers including the lettered prefix.
 24. Enter any additional pertinent information.
- C. Action by Applicant. For appeal, Board appeal or review services complete items 25 through 31.
25. Use the lot, carrier, or other identification shown on the certificate for the service in question. Identify a barge by name, number and any letterhead prefixes and suffixes; a railcar by its initials and number; a truck or trailer by license number and name or abbreviation of State (include time of sampling when necessary); and a vessel its name preceded by its means of propulsion (M/T, M/V, S/S, etc.)
 26. Enter the quantity in terms of bushels, pounds, weight loaded or unloaded, or to be loaded or unloaded for cargos. For a lot of sacked grain, also enter the type, number, and weight of sacks; e.g., 6000, 100-lb cotton sacks. For a truckload or trailerload, show truckload, trailerload, part-truckload or part-trailerload as the case may be. For a railcar, enter the marked capacity of the carrier or "over 130 000 lb" or under 130 000 lb" as the case may be.
 27. Enter the grain and reason for the appeal, Board appeal, or review; e.g., the grade determining factors or other criteria. For requests filed in advance, show the kind of grain and contract grade.

28. Enter the sample basis desired for the appeal inspection. All Board appeal inspections will be performed on the basis of the official file sample.
29. Enter the date of the original service. For applications filed in advance of loading, enter the expected date and time of loading if possible.
30. Indicate whether the original certificate for the inspection being appealed is attached. If the certificate is not attached, explain in item 31.
31. Enter any additional pertinent information.

CONTACT INFORMATION:

Contact the field office responsible for the geographic area in which the service will be provided. Details for these locations can be found at:

<http://www.gipsa.usda.gov/GIPSA/webapp?area=home&subject=fc&topic=fsp>

The signed form should also be mailed to this location.

For further information on the Application for Inspection and Weighing Services contact:

Robert S. Lijewski, Chief
Policies and Procedures Branch
Field Management Division
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Washington, DC 20250-3630

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AMA OUTPUT REPORT	FIELD OFFICE:				F.O. CODE	FISCAL YEAR:	
	STATE: <u>COOPERATOR:</u>					MONTH:	
TYPE OF INSPECTIONS	NUMBER OF INSPECTIONS						
	SUBMITTED SAMPLES		CERTIFICATES ISSUED		POUNDS (LBS) <u>COOPERATOR</u>		APPEALS
	FED	LIC	FED	LIC	FGIS - FED	LIC	
GRADED COMMODITIES							
DRY EDIBLE BEANS							
DRY WHOLE PEAS							
SPLIT PEAS							
LENTILS							
BROWN RICE							
ROUGH RICE							
MILLED RICE							
OTHER (SPECIFY)							
NON-GRADED COMMODITIES							
FLOUR (DPSC)							
FLOUR (OTHER)							
PROCESSED COMM. (DPSC)							
PROCESSED COMM. (OTHER)							
BUCK WHEAT							
HOPS							
RAPESEED							
SUNFLOWER SEEDS							
OTHER (SPECIFY)							
OTHER SERVICES							
AFLATOXIN <u>VOMITOXIN</u>							
BULK WEIGHING							
CONDITION ONLY							
FALLING NUMBER							
PROTEIN							
SANITATION							
SEDIMENTATION							
STOWAGE EXAMINATION ONLY							
TEK							
STARLINK							
OTHER (SPECIFY): <u>VOMITOXIN (DON)</u> <u>PHYTOSANITARY INSPECTION</u>							

REMARKS: OFFICIAL SAMPLING-ONLY TOTAL GROSS REVENUE: \$
SUBMITTED SAMPLES
POINT OF CONTACT PHONE NUMBER, DATE COMPLETED

OMB CONTROL NO. 0580-0013: 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 0580-0013. The time required to complete this information collection is estimated to average 15 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.