

U. S DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE SANITARY CERTIFICATE REQUEST		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. This valid OMB control number for this collection is 0581-0283. The time required to complete this information collection is estimated to average 12 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 information.	
TYPE Chile <input type="checkbox"/> Faxed Certificate* 0 Additional Copies* *additional charges apply			
<input type="checkbox"/> I acknowledge that by checking this box that the information provided is factual and accurate.			
CONTACT INFORMATION		MAILING INFORMATION	
1. CONTACT NAME		7. COMPANY	
2. AMS BILLING ACCT.		8. CONTACT	
3. BILLING REFERENCE		9. STREET	
4. E-MAIL ADDRESS		10. CITY	
5. CONTACT PHONE		11. STATE	
6. FAX		12. ZIP	
CONSIGNOR			
13. NAME			
14. ADDRESS			
15. CITY/STATE			
CONSIGNEE			
16. NAME			
17. ADDRESS			
18. COUNTRY CODE	CL		
IDENTIFICATION OF DAIRY PRODUCTS			
19. DESCRIPTION OF COMMODITY			
20. KIND OF HEAT TREATMENT (HTST; PASTEURIZED)			
21. TYPE OF PACKAGING			
22. NUMBER OF PACKAGING UNITS			
23. NET WEIGHT		lb	
24. REQUIRED TEMPERATURE DURING STORAGE AND TRANSPORTATION			
25. EXPIRATION DATE			
MANUFACTURER			
26. PLANT NUMBER			
SHIPMENT INFORMATION			
27. TRANSPORT TYPE		28. PLACE OF ORIGIN	
29. CONTAINER NUMBER		30. TRANSPORT NAME	
31. SEAL NUMBER			
<i>SIGNATURE (for faxed or mailed copies)</i>		32. DATE	

**For fastest processing, please attach this form and a PDF shipping label in an email to DairySanitaryCerts@ams.usda.gov.

DA-244 (01/2016)

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