**REPRODUCE LOCALLY** *Include form number and edition data on all reproductions.* **OMB 0581-0125**

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| UNITED STATES DEPARTMENT OF AGRICULTUREAgricultural Marketing ServiceSpecialty Crops Program | **NOTICE FOR HOLD FOR RE-EXAMINATION** |
| *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 0581-0125. 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.*  |
|  \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant Hold Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address (Include Number, Street, City, State, and Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **PRODUCT** | **QUANTITY** | **CODE MARK(S)** |
| **LABEL** | **WAREHOUSE LOCATION** |
| **REASON FOR HOLD** |
| We require that the above lot not be shipped pending further examination. The code mark(s) have been marked "hold" on inspection records pending further action. Control of this product must be maintained. If the product with the above code mark(s) is shipped prior to re-examination or prior to corrective action taken under USDA observation, it will be necessary to notify the Food and Drug Administration. |
| **DATE** | **USDA INSPECTOR (Signature)** |
| **Mark an "X" in the block that indicates the course of action that will be taken. Sign, date, and return a copy to the inspection or to the USDA office address by .****🞎 Re-examination of code mark(s) 🞎 Dispose for nonfood use****🞎 Re-examination after segregation****🞎 Re-examination after reworking 🞎 Other action (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   |
| **DATE** | **PLANT OFFICIAL (**Title and Signature**)** |
| **USDA REPORT OF RE-EXAMINATION**We have completed the re-examination of the above merchandise. Re-examination results indicate the product is . |
| **DATE** | **USDA INSPECTOR (Signature)** |
| **Control must be maintained on Grade Not Certified (GNC) products in order to preclude reporting to the Food and Drug Administration.****On GNC product, please indicate the appropriate steps that will be taken. Sign, date, and return a copy to the inspector or to the USDA office address by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .** |
| **APPLICANT - Complete by marking an "X" in appropriate block(s) and return: 🞎 SEGREGATION 🞎 RECONDITIONING****🞎 DISPOSAL of (product) by \_\_\_\_\_\_\_\_\_\_\_\_ 🞎 OTHER ACTION (Specify)**  |
| **DATE** | **PLANT OFFICIAL (**Title and Signature**)** |

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